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REGIONAL PLAN FOR TRANSPORTATION OF THE DISABLED

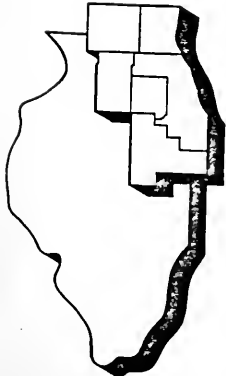


*RTA POLICY AND SERVICE BOARD
IMPLEMENTATION PLANS*

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Implementation Plan Review

Regional Summary

Introduction: The Regional Plan policies articulate a comprehensive direction for service for persons with transportation disabilities. The policies are based on the concept of equivalent public transportation service for the transportation of persons with or without disabilities. The goal of the policies is the establishment of a consistent long term direction that ensures service is coordinated and cost effective, is responsive and adaptable to emerging Federal and State regulations and that recognizes fiscal realities. This will aid in the provision of service for persons with transportation disabilities that is directed and can be relied upon by those who need the services.

The development of Implementation Plans by each of the Service Boards was guided by the Regional Plan policies that were unanimously adopted by the RTA Board on October 5, 1989. All three Service Boards have been responsive to the request for the development of Implementation Plans. This document provides a summary of the regional impacts of the Implementation Plans, as well as an analysis of the individual submittals.

The Regional Plan policies were organized into a number of different areas for the formulation of policy. Following is a discussion of some of the key points gathered from each of the Implementation Plans as they relate to the major policy areas.

Accessibility: In their Implementation Plans, all three Service Boards have followed the policy of moving towards accessible mainline service. Pace and CTA will have supplemental special services, while Metra's Plan indicates that they will phase out the RCAP program as the accessible railcars are deployed. This is consistent with the adopted Regional Plan policies.

Service Coordination: All three Service Boards discuss the need for coordination of their own services as well as with connecting services of the other Service Boards in their Implementation Plans. There is a regional commitment to develop a comprehensive system that is minimally burdensome on the user.

Eligibility Criteria: All of the Service Boards have expressed agreement with the adopted eligibility criteria policy. The eligibility criteria policy broadens the definition of severely mobility limited from the definitions currently being used by the Service Boards. The Implementation Plans address the expanded eligibility in different timeframes. A coordination issue as to the timing of the full

expansion of criteria is raised and must be addressed from a regional perspective in the near future.

Leveraging Resources for Special Services: Consistent with the Regional Plan policies designed to develop more cost effective means of providing special services, the CTA has submitted three specific proposals to be funded as pilot projects, with the goal of reducing the cost of particular types of special services trips. The Pace and Metra Implementation Plans address, in general, exploring ways to improve the cost effectiveness of special services.

Funding Level: The submitted Implementation Plans request a total of \$24.7 million for providing transit service to persons with transportation disabilities in 1990. Operating expenses represent \$23.4 million of the total (\$3.3 million for start-up, operating expenses associated with accessible mainline service and \$18.4 million for the provision of special services, and \$1.7 million for innovative pilot projects). Annualized capital costs for accessible vehicles delivered in 1990 or prior totals \$1.3 million.

The Regional Plan policies established a funding level guideline. The minimum level of funding by each Service Board is the cost of providing full performance accessibility. The maximum level of funding for all modes of transportation for persons with disabilities is 3% for CTA and Metra and 5% for Pace. As none of the Service Boards have yet reached full performance accessibility, it is the maximum funding level that is the guiding policy at this time.

1990 Expenditures on Service for the Disabled
(In thousands)

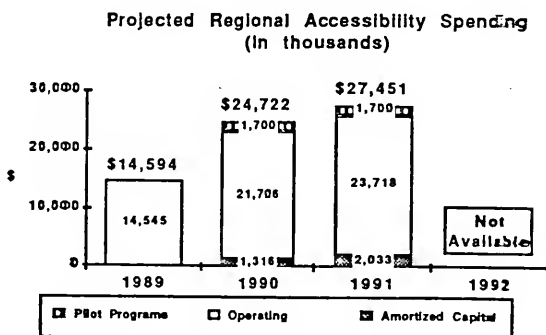
	<u>Operating</u>	<u>Annualized Capital</u>	<u>Total</u>	<u>% of 1990 Budget</u>	<u>Policy Maximum</u>
CTA	\$16,800	\$950	\$17,750	2.5%	3%
CTA (w/ pilot proj)	\$18,500	\$950	\$19,450	2.7%	3%
Metra	\$2,000	\$122	\$2,122	0.7%	3%
Pace	\$2,906	\$244	\$3,150	3.5%	5%

In addition to considering the policy compliance of the proposed expenditures, it is also important to examine the recovery ratio impact of the proposed 1990 expenditures. The effect of the incremental increases in operating expenses for services for the disabled is calculated to determine the recovery ratio impact. The incremental increase in operating expenditures from 1989 to 1990 is \$8.9 million including pilot project proposals. The impact on the 1990 regional recovery ratio is 0.25 percentage points compared to 1989.

Outlook: In this first year of the development of Implementation Plans, significant steps have been taken toward the goal of developing an accessible mainline system with the supplemental provision of special services. Each of the Service Boards have made capital commitments to purchase accessible equipment. Due to the lead time associated with the delivery of equipment, little impact of these purchases is seen in 1990. In the coming years, accessible mainline service will become an increasingly significant portion of the service that is provided to persons with disabilities.

As with any business plan, it is important that the Implementation Plans be viewed as dynamic documents. The Regional Plan policies require annual updating of the Implementation Plans, with each submittal covering a five year period. It is important that the 1991 Implementation Plans provide detail on the coordination of the various services offered by the Service Boards. A five year view is important to assure that services are deployed in a rational manner, and to avoid over expansion or inconsistent provision of services.

Based on Service Board projections, accessibility expenditures for the region over the next two years will be: \$24.7 million in 1990 and \$27.5 million in 1991. The chart below shows a breakdown between projected pilot program expenditures, operating expenses for fixed route and special services, and the annualized cost of capital.



Recommendation: Two major groupings of recommendations are made - funding recommendations and service coordination recommendations.

Funding Recommendations: The total appropriations for operating expenses recommended by staff for 1990 totals \$23.4 million. In addition to operating expenses the Service Boards will incur an estimated \$1.3 million in annualized capital costs.

The components of the operating expenses include expenses for both fixed route accessibility and special services at CTA (\$2.9 million and \$13.9 million respectively) and Pace (\$0.4 million and \$1.5 million respectively), and for special services at Metra (\$2 million). The total recommended appropriation includes \$1.7 million for CTA pilot projects if justified, and \$1 million for Pace service expansions if warranted.

Service Coordination: All three Service Boards need to focus on service coordination issues. Metra should include additional detail in their 1991 Implementation Plan. CTA has agreed to submit a second phase of their Implementation in early 1990 to address coordination between their special services and accessible fixed route services, and to provide expanded detail on their special services beyond 1990. Pace's current Implementation Plan submittal does not clearly address coordination issues between their three types of services - fixed route, special services, and local dial-a-ride. It also does not clearly address the type of services or the planned implementation of services in Du Page county. Staff recommends that Pace submit a second phase of their Implementation Plans to address these issues.

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CTA Implementation Plan Analysis

Summary: The Implementation Plan submitted by the CTA is consistent with, and supportive of, the general direction of the policies adopted during the Regional Plan process. The funding level requested by CTA for 1990 for mainline accessibility and Special Services is recommended for approval. The pilot projects for Special Services are recommended for appropriation and should be funded upon acceptance of the business plans for each project.

The CTA Implementation Plan is being developed in two phases, with the first phase addressing the service that will be in place in 1990, and the second phase addressing the longer term strategies and projections. The second phase will be submitted by mid 1990. Most of the requested information that was not provided in the Implementation Plan submitted by the CTA will be submitted in their second phase submittal.

Description of Service: Much of the direction of the CTA's programs of services for the disabled have been shaped by the Jones settlement. There is a rigorous process being followed in determining the deployment strategy for the 700 buses considered in the settlement. Lift-equipped buses (476) will be delivered beginning in early 1990, and will be deployed at three garages on a garage-by-garage basis with service in the first garage commencing in mid-March, followed by garages in May and July. An additional order of 200 lift-equipped buses will provide vehicles to two more garages, yet to be selected by CTA's Joint Implementation Committee (JIC). These vehicles will be deployed in early 1991. CTA does not plan to purchase buses in 1991-1994 because of E.P.A. regulations. Therefore, they plan to retrofit 24 buses to arrive at the 700 bus level agreed to in the Jones settlement. The Implementation Plan states that all future CTA bus purchases will be lift-equipped.

CTA Special Services will be slightly increased in 1990 and 1991. The CTA has proposed commencing three pilot projects in 1990 designed for more cost-effective provision of Special Services. These projects will be developed further to include complete business plans and specific criteria to measure project success and will be submitted as pilot projects in 1990. Each of the proposed pilot projects is described in more detail below:

- **Group Trip Pilot Project:** The objective of this project is to identify methods and incentives for passengers and service providers to arrange for grouped rides. Other areas, in particular Minneapolis, have incorporated a contract provision that calls for lower reimbursements for trip locations that are shared by multiple riders during the course of a week. The current CTA contracts with service providers do not have this provision. If this project is successful, CTA will be able to provide services for a segment of their riders - group trips - at a lower unit cost. The CTA estimates the cost of this project to be \$580,000.

- **Taxicab Pilot Project:** The objective of the taxicab pilot project is to determine the level of savings associated with the transportation of certified ambulatory disabled passengers using the existing Chicago taxicab industry. The project proposes to provide vouchers to passengers to use for fare payment. Other areas of the country, such as Houston, have found this approach to provide significant cost savings. The CTA requested funding for this project is \$1.08 million.
- **Unsubsidized Special Services Pilot Project:** The objective of this project is to facilitate the provision of additional special services trips for non-ambulatory persons. Currently, persons in wheelchairs have no reasonably priced alternative transportation if they are turned down from a CTA Special Services ride. The rider would pay the total cost of the trip. In effect, the CTA would act as a broker between individual riders and participating contract carriers. CTA has requested \$50,000 to study the feasibility of setting up such a program.

Cost Impact: The following Table illustrates the projected expenditures reported in CTA's Implementation Plan. The information for years beyond 1991 will be provided in the second phase of the Implementation Plan.

CTA Implementation Plan Projected Expenditures (in thousands)					
Operating			Capital		
Fixed Route	Special Services	Operating TOTAL	Annualized Fixed Route	Special Service	Capital TOTAL
1989	\$0	\$13,100	\$0	-	\$0
1990	\$2,900	\$13,900	\$950	-	\$950
1991	\$3,580	\$14,500	\$1,350	-	\$1,350

The first phase of the Implementation Plan submitted by CTA projects expenses for 1990 and 1991. At this time, there are questions about the 1991 expense projections that will be resolved in the second phase of the 1990 Implementation Plan to be submitted in early 1990.

CTA's 1990 operating expenses of \$16.8 million represent an estimated \$2.9 million for start-up costs and maintenance expenses for accessible buses during the year. Special Service increases reflect contract increases in addition to a slight increase in service levels.

The capital costs in 1990 of \$0.95 million represents the annualized capital costs of 476 lift-equipped buses. The cost is based on an assumption of \$15,000 per lift at an opportunity cost of 8%. In 1991, the annualized capital cost increases to \$1.35 million with the delivery of an additional 200 lift-equipped buses.

There are two measures of cost impact - recovery ratio impact and overall funding level as defined in the Regional Plan policies. The increase of \$3.7 million in operating expenses over 1989 expenses has the result of reducing the 1990 recovery ratio by 0.27 percentage points. The recovery ratio impact would be reduced to 0.2 percentage points with the inclusion of \$1.7 million in pilot projects. The Regional Plan defines funding level as operating expenses (exclusive of start-up costs) plus the annualized capital costs. The Regional Plan policies state that the maximum funding level for services for persons with disabilities at the CTA is 3%. Their 1990 expenditure of \$17.75 million represents 2.5% of the CTA's 1990 budget, which is within the policy guidelines. (A split between start-up and ongoing operating expenses will not be available until the second phase of the Plan is completed, therefore the \$17.75 million is high by the amount of start-up expenses)

Level of Service: 1990 will bring a new mode of transportation to persons with disabilities. By the end of the year, 476 lift-equipped vehicles - or 22% of the CTA fleet will be lift-equipped. At this time, ridership projections are difficult to make. Based on Seattle's current experience, an optimistic ridership of 190 passengers per day can be estimated.

The level of CTA Special Services is not projected to increase significantly in 1990 or 1991. Based on the known contract costs for 1990, the \$13.9 million purchase of service budget is estimated to provide approximately 852,000 trips, or 2,330 trips per day. This is just slightly higher than the 1989 estimates.

The CTA has had eligibility criteria representing the severely mobility limited since program inception. Therefore the eligibility expansion proposed in the Regional Plan policies is not likely to have a significant effect on the demand for CTA Special Services.

Compliance with Policies: As the CTA Implementation Plan is not currently complete, assessment of CTA's compliance with the Regional Plan policies cannot be made. However, the first phase of the Implementation Plan, already submitted, discusses the content of the second phase. If completed as discussed, it appears that CTA will be in compliance with the Regional Plan policies upon completion of the Implementation Plan.

THE CHICAGO TRANSIT AUTHORITY

PHASE1: Implementation Plan

For

Transportation Services To The Disabled

Submitted To:

The Regional Transportation Authority

By:

**The Chicago Transit Authority, Planning,
Marketing and Development Department**

Date:

December, 1989

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TRANSPORTATION OF THE DISABLED

CTA IMPLEMENTATION PLAN

I. INTRODUCTION:

At its October meeting the Regional Transportation Authority Board adopted a set of policies governing the provision of transportation services to the disabled community in the Chicago Metropolitan area. The resolution that adopted the policies directs the Service Boards including the Chicago Transit Authority "... to develop implementation plans that are in accordance with the Regional Plan policies as adopted by the RTA prior to the authorization of funds for mobility limited services in the 1990 Budget."

In the opinion of the Chicago Transit Authority the key provisions of the regional policies are:

- Each Service Board must develop a comprehensive long range plan for providing service to the disabled which specifies the long term goals and policies...
- Each Service Board must provide a full performance accessible mainline service as the foundation of an accessible regional system. Supplemental special services are offered in recognition that mainline systems may not meet the needs of all disabled.
- The group of disabled individuals that should be certified as being eligible for special services are the Severely Mobility Limited. The severely mobility limited are defined as those who have great difficulty or cannot use public transportation at all.
- The Service Boards and the RTA should encourage entry into and participation in the market for special service by a variety of providers to ensure that sufficient providers are available for increased competition in the marketplace.
- Lift use policies should encourage the use of the lift as a passenger convenience and should, at a minimum, be available for use by an disabled passenger upon request provided that the requestor's safety can be assured.
- The minimum level of funding by each Service Board is the cost of providing full performance accessibility. The

maximum level of funding, for all modes of transportation for the disabled will be 3% for CTA and Metra and 5% for Pace.

Therefore, it is against this backdrop that CTA submits its initial Implementation Plan for Transportation of the Disabled.

However, it is important to note that the plan is articulated in a fashion consistent with the requirements specified in Mr. Weigle's letter of October 19, 1989 and Mr. Ford's response of November 13, 1989. That is to say, the CTA plan will be submitted in two phases. Phase I which is contained herein will discuss our 1990 transportation program for the disabled. Phase II which will be submitted later in 1990 will present a more detailed explanation of the issues, strategies and processes associated with implementing full performance accessibility for a multi-modal transit system.

II. CTA'S 1990 PROGRAM FOR TRANSPORTATION OF THE DISABLED:

CTA's 1990 program for providing transportation services to the disabled community has two main components. 1) an introductory main-line fixed-route lift-equipped bus service, and 2) the continuation of the demand-responsive Special Services Program. A brief description of each, complete with budget, follows:

A. MAIN-LINE LIFT EQUIPPED BUS SERVICE:

In February 1989, the Chicago Transit Authority and several individuals came to an agreement to settle litigation which had been initiated by wheelchair users over the lack of wheelchair lifts on CTA fixed route buses (known as Kent Jones, et al vs. RTA and CTA) The agreement is documented in the Order Approving Terms of Settlement (Settlement Order) dated February 10, 1989 by the State of Illinois Human Rights Commission.

1. Key Requirements:

The aforementioned Settlement Order outlines the programmatic requirements and the process that the CTA will use to deploy and evaluate its lift equipped bus service. The order requires the CTA to:

- * Within 60 days of the settlement, establish the Joint Implementation Committee (JIC).

- Purchase and deploy an evaluation fleet of 700 lift-equipped buses in the CTA service area for a period of at least 5 years.
- Collect and evaluate time usage, cost and demand data on the mainline, fixed-route lift-equipped bus service.
- Make bi-monthly reports to the JIC regarding routes and deployment, operations and maintenance, marketing and consumer education, ridership, bus order and delivery status, as well as evaluation data.
- Consider in good faith, the Joint Implementation Committee's recommendations.
- Engage a consultant to conduct the evaluation and support the implementation.
- Purchase and acquire only lift-equipped buses until at least 50% of the buses deployed in the peak hours and 100% of the buses deployed during off-peak hours are lift-equipped; if, at the end of the evaluation period, the average unit cost of a lift-equipped bus trip is no greater than 120% of CTA's cost of providing a paratransit trip.

2. Route Structure:

Having devoted the bulk of 1989 to planning, the CTA will concentrate its energies and resources during 1990 on deploying and evaluating the first 676 of the required 700 lift equipped buses. Fundamental to the implementation plan is the lift-equipped bus delivery schedule. The CTA has on order 676 new front door lift-equipped buses. The buses are being purchased in two separate orders. The initial purchase commitment is for 476 buses. According to the most current schedule these buses will be delivered between January and July of 1990.

The route plan, developed in consultation with the Joint Implementation Committee, allocates the 476 buses to three (3) garages:

- Kedzie (7 routes)
- 77th (6 routes)
- North Park (7 routes)

The routes to have lift-equipped service at each garage are as follows:

KEDZIE GARAGE

7 Harrison
20 Madison
131 Washington
52 Kedzie/California
66 Chicago
72 North Avenue
74 Fullerton

77th STREET GARAGE

1 Indiana/Hyde Park
3 King Drive
8A South Halsted
29 State
79 79th Street
95W West 95th Street

NORTH PARK

11 Lincoln
22 Clark
49B North Western
97 Skokie
151 Devon
201/203 Evanston

It is important to note that, although the Settlement Order specifies a minimum service level of 50% lift bus coverage during peak hours and 100% coverage during off peak hours, CTA has elected to provide 100% coverage during both peak and off peak operation. The reasons that CTA has elected to provide this higher level of service are as follows:

- On most routes buses which pullout in the a.m. rush return to the garage after the p.m. rush with evening service being covered by p.m. rush pullouts. A 50% peak hour assignment would necessitate long gaps in evening coverage or buses would have to be rescheduled. Further, the assignment of buses to long blocks creates problems of debris accumulation and maintenance repair.

- On routes with short turnbacks such as #3 King or #22 Clark the 50% peak method would cause large gaps in service to the outer terminal such as Howard or 95th Street.
- The 50% peak service method would require more street supervision to correct service problems caused by lift bus breakdowns and off schedule conditions.
- To smooth out gaps in scheduled service, many economies now achieved by short turns and early pull-ins would be lost using the 50% peak method thus increasing operational costs.
- The higher level of service (100% peak and off peak) provides the reliability and predictability required to attract maximum ridership.

Delivery of the second bus order, 200 additional front door lift-equipped buses, is expected during the later half of 1990. These buses will be assigned to 2 additional bus garages. The garage and route assignments will be made in early 1990 after consultation with JIC.

3. Operating Requirements:

The implementation plan for the main-line lift equipped bus service also addresses operator training, lift usage and lift maintenance. A brief discussion of each is here provided.

Operator Training:

The quarterly pick procedure coupled with the extra board process dictates training all operators at each of the garages assigned lift-equipped buses. Therefore each operator at all five buses garages will receive ten (10) hours of training.

Lift Use Policy:

Another item key to the implementation of the lift-equipped bus service is the lift usage policy. Consistent with the RTA REGIONAL PLAN FOR TRANSPORTATION OF THE DISABLED the CTA has adopted a lift use policy that encourages the use of lifts and is available to any disabled passenger upon request.

4. Start of Service:

Lift service will begin on routes in a given area when the bus allotment for an entire garage has been received; such buses, however, will be used for non-lift services as received and certified. Consequently, lift bus service at the first garage is anticipated to begin mid-march. Service at the second and third bus garages should start in May and July respectively. Service from the fourth and fifth bus garages should begin during the fourth quarter of 1990 and/or first quarter of 1991.

5. Maintenance:

To support the main-line lift-equipped buses, CTA has developed a maintenance program complete with preventive maintenance, emergency repair, spare parts inventory, work order, and training components. Inasmuch as maintenance of the lift systems requires specialized skill and knowledge unique from other bus maintenance requirements, CTA has elected to establish a new maintenance job classification dedicated to lift repair. The minimal level of staffing ¹ required to maintain lifts at the three bus garages and the main bus shop is:

- ° 19 Garage Based Lift Maintenance Specialists.
- ° 2 Shop Mechanics.
- ° 1 Foreman.

The mechanic to bus ratio is one to thirty (1-30).

6. Marketing:

The CTA recognizes that a well designed and carefully executed marketing program is necessary to both promote ridership on the main-line lift equipped bus service and to wean ridership away from the more costly paratransit service.

¹ The minimal staffing rate was derived from survey information and follow-up inquiries made to large northern transit systems with experience operating large lift-equipped bus fleets.

Therefore, during 1990 CTA will execute a market strategy that has seven (7) major components.

- 1) Conducting a Technical Fair to alert wheelchair buyers and manufacturers to bus capabilities and limitations.
- 2) Producing and distributing a brochure describing CTA's total program for transportation of the mobility limited.
- 3) Developing a video illustrating proper use of the main-line bus service.
- 4) Conducting Bus Demonstration sessions in neighborhood and at consumer organization locations.
- 5) Conducting a direct mail program to potential users.
- 6) Conducting a Print Advertising Campaign.
- 7) Developing a broadcast media program to promote service introduction.

7. BUDGET:

The total budget necessary to introduce, operate and maintain the lift-equipped buses that will be introduced into service during 1990 is 2 Million, Nine Hundred Thousands Dollars (\$2,900,000) exclusive of capital cost and depreciation. This figure was calculated as follows:

Maintenance	=	1,589,000
Operations	=	861,000
Planning & Marketing	=	<u>450,000</u>
TOTAL		2,900,000

The following table identifies the number of vehicles placed in service and the percent accessibility that will be achieved in each year of the five year plan.

EXHIBIT 1:

YEARLY MAIN-LINE ACCESSIBILITY

YEAR	NO. OF MAIN-LINE LIFT-EQUIPPED	BUS FLEET SIZE	PERCENT ACCESSIBILITY
	BUSES		
1990	476	2200	22
1991	676	2200	31
1992 *	700	2200	32
1993 **	700	2200	32
1994 **	700	2200	32

* Current plan require retrofitting 24 existing buses with lifts to fulfill the requirements of the Jones Settlement Agreement.

** CTA does not plan to purchase any additional buses during either 1992, 1993 or 1994.

B. 1990 SPECIAL SERVICES PROGRAM:

The Special Services Program has grown substantially since it began in 1981 under direct CTA operation. Increasing popularity following its 1985 privatization has resulted in a rising demand curve and unmet demand. It has become clear that the demand for service will continue to greatly surpass available funds. Additional budgetary pressure exists due to the average Eighty-Five Cents (\$.85) per trip increase due to vendors under terms of the contract with CTA. Rather than taking the easy and obvious path of simply requesting more monies to fund the residual demand the CTA intends to take a more responsible and potentially more rewarding approach. The 1990 Special Services budget request will be (Thirteen Million, Nine Hundred Thousand Dollars \$13,900,000) for services. Additionally the CTA is requesting the RTA to fund three alternative service programs to determine if there are other ways to provide safe reliable service at reduced cost. The estimated cost of these three alternative or Pilot Programs is one million seven hundred thousand dollars (\$1,700,000.00) The initial investment in these projects would eventually be compensated by their impact on reducing paratransit

cost. An overview of each is provided hereinafter, with details to follow in CTA's Phase II submittal.

1. Group Trip Proposal:

In much of the literature discussing the costs of specialized transportation, there is emphasis on patterns of demand. Specifically mentioned is the need to identify the locations in the service region where demand is most concentrated. The idea is that trip costs should be lower if the providers can maximize the grouping of trips in terms of origins, destinations, or both. With the advent of lift service, the opportunities for grouped demand might increase at transfer point locations. Instead of imposing new conditions on the Special Service carriers in the Operating Policies and Procedures, this proposal envisions a change where CTA works with the carriers and consumers to test a concept in a way that is mutually attractive.

Project Description:

During the first phase of the project, CTA staff would work with the carriers and interested consumers to determine fair prices, establish service guidelines, and identify which locations have the greatest potential for grouped trip making. A major part of this work involves defining the parameters needed to make the concept work. Initially, we would want to determine the exact combinations of origins and destination that would work together. Using its database, CTA would present breakdowns showing which origin to destination combinations have the highest frequency of Special Service ridership, throughout the day and during peak travel periods. We would incorporate other locations that would be desirable as transfer point for accessible fixed route service (CTA bus and rail modes and possibly PACE routes as well). In addition, CTA staff would spell out the measures to be used in determining whether the project is successful.

The second phase of the project is service delivery. Riders would be informed on the workings of the program, how to use the service (who they would call, where they could go, what they would pay, etc.). Statistics would be compiled to give a picture of how the service is used and would be

compared to earlier expectations. Evaluation would also include measuring rider attitudes on the differences between the new service and the existing Special Service program.

Previous Experience:

The Regional Transit Board in Minnesota has incorporated a provision in their contracts with service providers that calls for lower reimbursement rates for trip locations that are shared by multiple riders during the course of a week.

Budget:

Purchase of Service Provision	\$500,000
Administration	45,000
Evaluation	35,000
TOTAL BUDGET	\$580,000

2. Chicago Taxicab Expansion Proposal:

Other cities have made use of their taxicab providers in the form of user-side subsidies, where disabled riders are given scrip or vouchers that can be used for service when accompanied by a nominal fare. The taxi companies then present the scrip for reimbursement, along with some documentation regarding their use.

The mechanics of these systems are different than the administration of CTA Special Services. There is typically minimal certification or registration of vendor, vehicles and drivers. Control is more by way of audit than Special Services provides, where CTA has the capability to monitor any trip from reservations to provision to posted trip ticket. CTA should explore this idea for implementation in Chicago, primarily for riders who are ambulatory and not in need of specialized modifications to the standard Chicago taxicab.

Project Description:

This proposed project would carry out one of the innovations discussed in the RTA led the development of the Regional Plan for Transportation of the Disabled. The objective of the project is to determine if there are savings associated with transportation of certified disabled riders through

a voucher system that provides safe and reliable service. The project would be initially limited to the City of Chicago and to ambulatory riders.

During the first phase of the project, CTA staff would work with the City, cab companies, and interested consumers to determine procedures and establish service guidelines. It is recommended that for the pilot program the meter rate would be paid by the Authority. This phase includes the development of means to control budget expenditures. In addition, CTA staff would spell out the measures to be used in determining whether the project is successful with success defined by two factors: 1) how much less expensive to the Authority is a taxi trip compared to our present Special Service trip, and 2) are the controls which are minimal in a user side subsidy program adequate to meet the Authority's and Consumers needs.

The second phase of the project is service delivery. Riders would be informed how to obtain the payment media and how to request and use the service (who they would call, where they could go, when they can call, etc.). Statistics would be compiled to give a picture of how the service is used and would be compared to earlier expectations. Evaluation would also include measuring rider attitudes on the differences between the new service and the existing Special Service program.

Previous Experience:

In the Chicago area, Chicago and suburban taxicabs have a history of supplying service for the disabled. It has only been in the past 15 years that transit agencies have been targeted as responsible for meeting these transportation needs. During the course of the Regional Plan process, PACE representatives indicated that the suburban cab industry has been utilized in a formal relationship as a provider before, with mixed results. Because of the differences between city and suburban taxi operations and land usage, it is unclear as to how transferable these results would be.

Budget:

Purchase of Service Provision	\$1,000,000
Administration	45,000
Evaluation	<u>35,000</u>
TOTAL BUDGET	\$1,080,000

3. Unsubsidized Special Service Proposal:

Project Description:

This proposed project would carry out another one of the innovations discussed in the RTA led development of its Regional Plan for Transportation of the Disabled. The objective of this project is to determine if there is a market for service to Special Service riders who seek to make reservations with less advance time than currently allowed or after CTA's budget reservation limit has been met for the day. Current options for a rider who is unable to make a reservations for a trip the following day are limited. Often people must either forgo the trip entirely or else negotiate for service from the private sector directly. Purchasing service for single trips can entail significant costs (upward of \$50 per one way trip plus mileage), particularly from medical transportation companies, which generally provide less assurance of performance/safety standards than CTA Special Service operations. The market to be studied would involve no budgetary participation on the part of the CTA. In a sense, CTA would be acting as a broker between individual riders and participating contract carriers.

During the first phase of the project, CTA staff would work with the carriers and interested consumers to determine fair prices and establish service guidelines. Initially we would assume that the carriers would accept their existing contract price with CTA for each rider as their fare, although there may be reasons to make some adjustments, both to simplify the program and mitigate the impact on the lower-income riders. In addition, CTA staff would spell out the measures to be used in determining whether the project is successful.

The second phase of the project is service delivery. Riders would be informed on the workings of the program, how to enroll, how to request and use the service (who they would call, where they could go, what they would pay, etc.) Statistics would be compiled to give a picture of how the service is used and would be compared to earlier expectations. Evaluation would also include measuring rider attitudes on the differences between the new service

and the existing Special Service program and on whether the new service improved their quality of life.

Previous Experience:

Unsubsidized service for the disabled was the standard for general travel needs before the early 1970's, when transit and city agencies began to assume responsibility for meeting these transportation needs. Social service agencies before and since have tended to provide transportation which primarily serves their own program. Transit agencies have set up brokerage operations in other regions, notably in Pennsylvania. This program would operate differently in the sense that a client's participation would hinge simply on how far in advance a reservation is placed or on whether CTA's budgetary limits allow additional service for that day.

Budget:

No operating funds are considered for the operating phase of the project. We anticipate that approximately \$50,000 will be needed to develop and market the program.

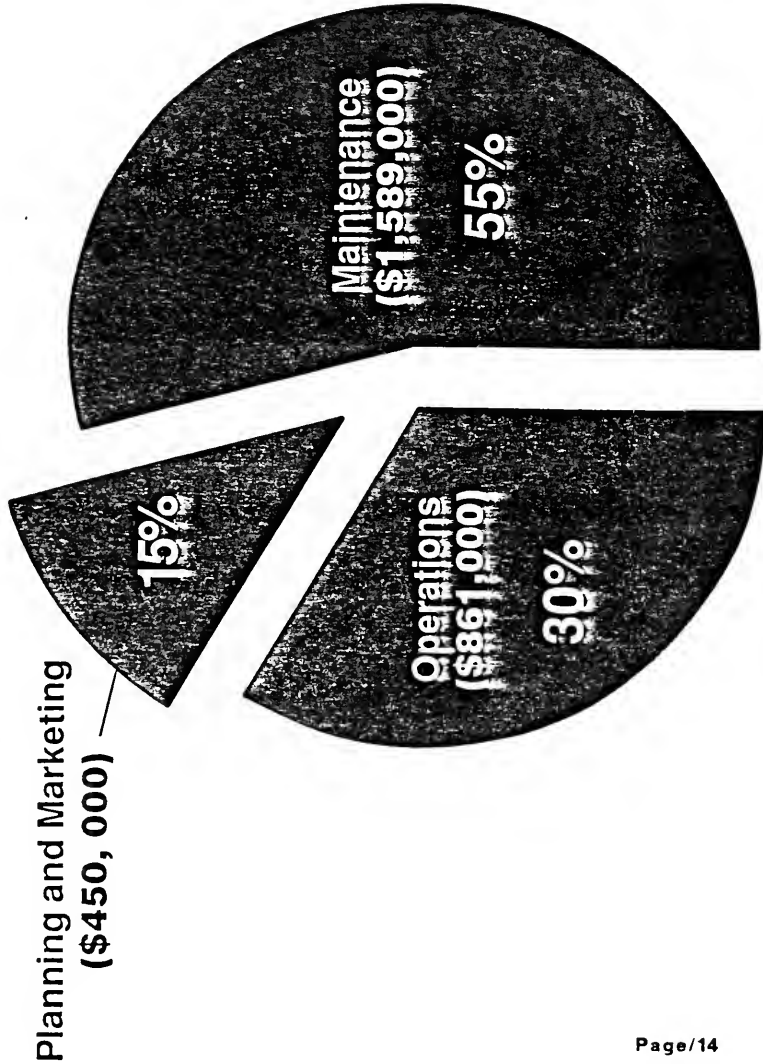
III. TOTAL BUDGET REQUEST FOR TRANSPORTATION SERVICES FOR THE DISABLED.

The graphs provided hereinafter are offered as a means to illustrate:

1. How funds required to support the main-line lift equipped service will be allocated. (Exhibit 1)
2. How monies required to fund and improve Special Services are to be allocated. (Exhibits 2)
3. The total budget request to fund transportation services to the disabled. (Exhibit 3)

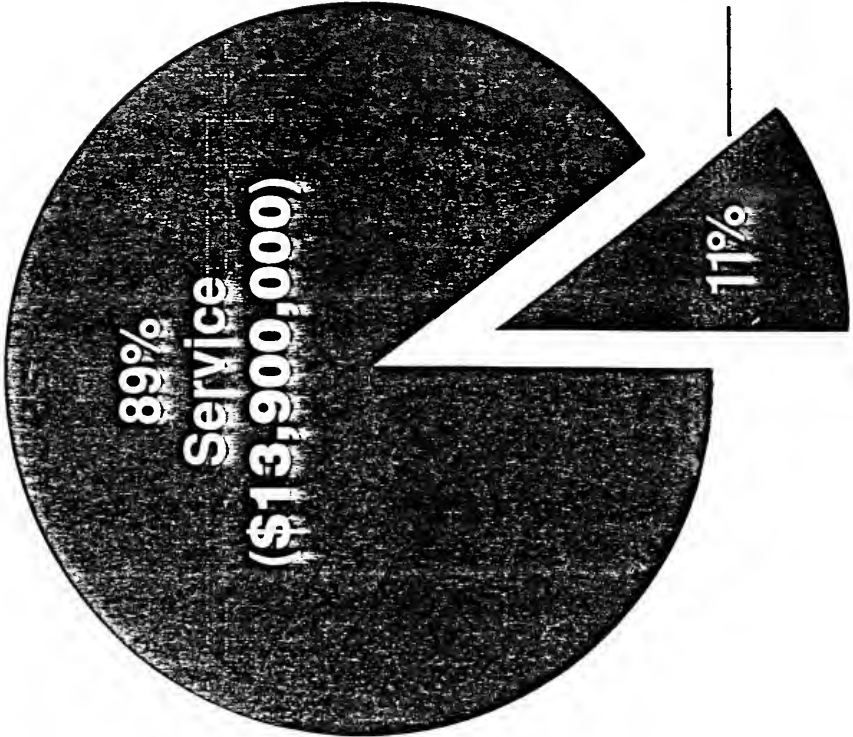
TOTAL 1990 REQUEST FOR MAINLINE LIFT EQUIPPED BUS SERVICE

Total Request (\$2,900,000)



PROPOSED 1990 SPECIAL SERVICE BUDGET

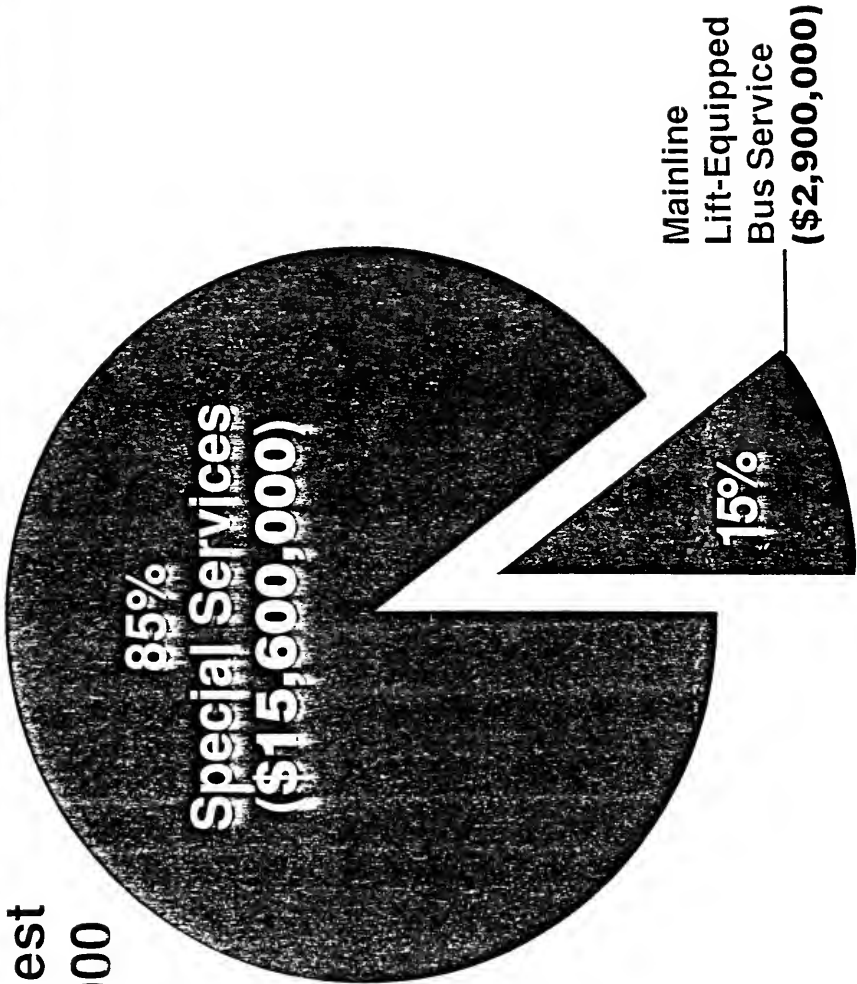
(\$15,600,000)



Cost-Reduction
Pilot Programs
(\$1,700,000)

TOTAL BUDGET REQUEST FOR TRANSPORTATION SERVICES FOR THE DISABLED

Total Request
\$18,500,000



IV. CRITICAL ITEMS:

In written communication regarding Implementation Plan submission requirements, the RTA has established "critical issues that the CTA must address within the context of its plan. Those issues are

A. Equipment:

- Schedule of delivery of accessible buses and planned deployment.
- Capital cost of accessibility features on vehicles and/or garages.
- Operating cost for main-line accessibility.

B. Stations:

- List of accessible stations by line.
- Schedule for making inaccessible stations accessible.

C. Special Services:

- Projected special services expenditures ridership, revenue and subsidies for the next five years.
- Eligibility criteria.
- Administration of Special services including cost or service improvements.

D. Long Range Plan:

- Narrative description of CTA's service for the disabled beyond the Implementation Plan time frame.

Considering the extremely short time period between RTA's adoption of the Regional Policies in October, 1989 and the date that CTA is required to submit its preliminary plan (November 1989) time does not permit a thorough and complete treatment of each. Therefore, this section purposes to:

- Affirm CTA's intention to submit at a later date an Implementation plan that details all of the requested data; and

- Address in a general fashion, where possible, the critical items.

A. Equipment:

At this juncture the CTA's bus delivery and development schedule is limited to that which is detailed in the description of the 1990 main-line Lift Equipped Bus Service contained in Section II of this document. That schedule indicates that CTA will receive and deploy 676 lift equipped buses between January 1990 and the first quarter of 1991. The bus procurement schedule and facilities required to achieve full performance accessibility will be developed after a thorough analysis of equipment needs, procurement options and capital requirements. In the future CTA plans to purchase only lift-equipped buses. The detailed schedule will be included in CTA's Phase II Plan submittal. Relative to operating cost for main-line accessibility, again CTA can now provide only those cost associated with its 1990 service and a projection for 1991. The 1991 projections are an estimate of the budget required to operate 676 lift-equipped buses. The 1990 and 1991 cost projections are as follows:

	<u>Start-up</u>	<u>1991</u>
Planning & Marketing	450,000	450,000
Operations	861,000	1,222,000
Maintenance	<u>1,589,000</u>	<u>1,907,000</u>
TOTAL	2,900,000	3,579,000

Projections for 1992 through 1994 will be included in CTA's Phase II submittal.

B. Stations:

Exhibit 5 - which follows lists CTA's current accessible rail stations.

EXHIBIT 5:

ACCESSIBLE CTA RAIL STATIONS

<u>LINE</u>	<u>STATION</u>
HOWARD-ENGLEWOOD/JACKSON PARK	LOYOLA GRANVILLE JACKSON
O'HARE-DOUGLAS	O'HARE RIVER ROAD CUMBERLAND HARLEM/HIGGINS STATE OF ILLINOIS CENTER POLK CICERO/CERMAK DESPLAINES
LAKE-DAN RYAN	79TH STREET
RAVENSWOOD	KIMBALL/LAWRENCE WESTERN/LAWRENCE MERCHANDISE MART

Inasmuch as conversations with RTA staff have indicated that rail station accessibility would not be a requirement of CTA's Implementation Plan, the CTA is not now prepared to address this issue. Therefore, rail station accessibility will be addressed as part of CTA's Phase II Plan.

C. Special Services:

Most of the requested critical items relating to special services have been addressed within CTA's 1990 Program Description. Those that remain are:

- ° Projected expenditures, ridership, revenue and subsidies for years two through five; and

• Eligibility Criteria.

Relative to the expenditures projections, the CTA can not project beyond the 1990 and 1991 budget years. As indicated earlier in this document the CTA is requesting Fifteen Million Six Hundred Thousand Dollars (\$15,600,000) to fund a two pronged Special Services Program; (standard Paratransit = \$13,900,000 and pilot programs = \$1,700,000). At this juncture CTA estimates that its combined 1991 Special Services request will be Sixteen Million Two Hundred Thousand Dollars (\$16,200,000). This request represents refunding the three pilot projects at their 1990 levels; and adjusting the standard special services programs by the cost increase scheduled for the carriers. Therefore, the total 1991 cost for transportation services for the disabled is anticipated to be:

Standard Special Services	=	14,500,000
Pilot Programs	=	1,700,000
Main-Line Lift-Equipped Bus Service	=	<u>3,579,000</u>
TOTAL		19,779,000

However, regarding the cost projections for years three through five and the ridership revenue and subsidies for years two through five, suffice it to say the CTA will include these in its Phase II submittal. Additionally beginning in 1992 CTA will request the RTA to allocate a level of funding sufficient for CTA to devote 3% of its operating budget to transportation services for the disabled.

Relative to the eligibility criteria CTA will transition to criteria which:

- Assures that the resources available for special services provide service to those who most need the services; and
- Is consistent with its ability to provide a fully accessible main-line service and a supplemental paratransit service.

D. Long Range Plan:

As indicated throughout this document CTA intends to prepare a detailed Implementation Plan for providing transportation services to the disabled. Given the complex nature of the many issues that must be addressed coupled with the many legal uncertainties;

including Section 504 regulations, the impending American Disabilities Act and the Jones Settlement Order; CTA plans to include its Long Range Plan as part of its Phase II submittal. The present timetable for completing the Phase II Plan is mid to late 1990.

Metra Implementation Plan Analysis

Summary: Metra's general policy and timetable for implementing accessible mainline service is provided in the Implementation Plan. The Plan is consistent with the policies adopted in the Regional Plan process. The funding level requested by Metra for 1990 is recommended for approval.

There are some requested details that were not provided in the 1990 Implementation Plan. These are items that are not important for the next budget year, but should be included in the 1991 Update of the Implementation Plan. Such items include, projected RCAP ridership, expenditures and revenues for 1991 - 1995. Further detail on the deployment of accessible rail service, and the schedule of station accessibility should be part of the 1991 Plan also.

Description of Service: Metra's Implementation Plan indicates that they are planning to become a mainline accessible system by equipping one car (the cab car) per train with accessibility features. In addition to the cab cars, Metra will retrofit one car per train on their electric lines to enhance their accessibility. This retrofit program will be completed by 1994. Accessible cab cars are currently included in the Metra capital program. Accessible cars will be delivered between 1992 and 1995. Specific plans for implementation are not provided, however they expect that accessible mainline service will be implemented on a line-by-line basis. Concurrent with the phase-in of accessible mainline service, the RCAP service in the corridor would be phased out. There are currently no specific details as to how that would occur. Since accessible service will not be implemented until mid 1992 at the earliest, Metra plans to address these issues with their Advisory Committee and provide detailed plans in their 1991 Plan.

In the period preceding the implementation of accessible mainline service, Metra will be providing expanded RCAP service. Changes to the RCAP program are being developed jointly between the Metra staff and the newly created Mobility Limited Advisory Committee.

Cost Impact: The following Table illustrates the projected expenditures reported in Metra's Implementation Plan.

	Metra Implementation Plan Projected Expenditures (In thousands)					
	Operating			Capital		
	Fixed Route	RCAP	Operating TOTAL	Annualized Fixed Route	RCAP	Capital TOTAL
1989	\$0	\$800	\$800	\$0	-	\$0
1990	\$0	\$2,000	\$2,000	\$122	-	\$122
1991	\$0	\$2,200	\$2,200	\$310	-	\$310

Metra's Implementation Plan projects expenses for 1990 and 1991. In 1992, Metra will begin to have operating expenses associated with fixed route service, and will have increased annualized capital costs from the projected 52 accessible cab cars to be delivered that year.

Metra's 1990 operating expenses of \$2 million represent estimated RCAP expenditures for expanded eligibility criteria and expanded days and hours of service. The 1991 operating costs represent a 10% increase in RCAP expenditures, for estimated increases in contract cost and some service expansion.

The capital costs in 1990 of \$122,000 represents the estimated annualized capital costs of modifications to 13 Metra Electric multiple unit (MU) cars. The cost is based on an assumption of \$100,000 per car at an opportunity cost of 8% over the 25 year life of the car. In 1991, the annualized capital cost increases to \$310,000 with the modification of an additional 20 MU cars.

There are two measures of cost impact - recovery ratio impact and overall funding level as defined in the Regional Plan policies. The increase of \$1.2 million in operating expenses over 1989 expenses has the result of reducing Metra's 1990 recovery ratio by 0.21 percentage points. The Regional Plan defines funding level as operating expenses, exclusive of start-up costs, plus the annualized capital costs. The Regional Plan Policies state that the maximum funding level for services for persons with disabilities at Metra is 3%. The 1990 expenditure of \$2.12 million represents 0.7% of the Metra's 1990 budget, which is within the policy guidelines.

Level of Service: Accessible rail will not be in operation in the Metra system until 1992. Between 1992 and 1995, accessible rail will be deployed on a line-by-line basis. Until accessible rail service is implemented, Metra's dial-a-ride service for persons with disabilities - RCAP - will continue to increase. In 1990, the amount of service provided by RCAP will slightly more than double to the provision of 94 one-way trips per day. A projected 10% increase in the RCAP budget in 1991 will permit for inflation and a small increase (4-5%) in number of trips. Once accessible rail service is deployed in a corridor, the RCAP service in that corridor is expected to be phased out. No ridership estimates for changes in RCAP in 1992 are included in the Implementation Plan at this time, but should be included in the 1991 Plan.

A major change in the RCAP program, in addition to the increased funding, is the expansion of eligibility to include the ambulatory disabled. Days and hours of service will also be expanded in 1990 as recommended by the Metra Mobility Limited Advisory Committee.

Compliance with Regional Plan Policies: The Metra Implementation Plan is consistent with the policies that were adopted in the Regional Plan process. It

adheres to the provision of mainline accessibility as the primary mode of transportation for persons with disabilities. The implementation strategy generally discusses the phase out of RCAP service as more of the accessible mainline service is deployed, also consistent with the Regional Plan policies.

Metra should give additional consideration to developing innovative methods of cost-effective service delivery. In particular, as Metra expands the eligibility criteria for RCAP by making ambulatory disabled eligible for service, there is an opportunity to search for more cost effective methods of transportation provision.

METRA

ACCESSIBILITY PLAN

NOVEMBER, 1989

DRAFT

RECEIVED

NOV 15 1989

EXECUTIVE DIRECTOR'S OFFICE

Metra
Metropolitan Rail

Prepared by the Office of Planning and Analysis

Metra

ACCESSIBILITY IMPLEMENTATION PLAN

I. LONG RANGE STRATEGY

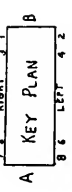
Metra's long range goal is to achieve a fully accessible commuter rail system. Disabled commuters will be "mainstreamed" with respect to Metra services. This goal will be accomplished through modifications to both the vehicles and the stations. In general, accessibility will be provided as follows:

- Accessibility will be provided to the disabled via Metra's mainline rail system. At least one car per train will be accessible to disabled passengers, including those in wheelchairs. On the diesel lines, accessible cab cars will be equipped with electric-mechanical lifts, providing access from low-level platforms to the cars' conventional floor height. See Figures 1 and 2 for conceptual floor plans for the accessible cab car. On the Metra Electric line, bridgeplates will be available as needed to cover the horizontal gap between the high-level platforms and the cars. In addition, vestibule and seating modifications will be made to both diesel and electric accessible railcars in order to accommodate the disabled.
- Metra's on-going Station Program will continue to improve overall station accessibility. Provision of accessibility features, for wheelchair users and other people with mobility limitations, is an integral part of the Metra Station Program. Under this program, new station construction is always accomplished in an accessible fashion, and major reconstruction projects provide for complete accessibility to the extent feasible. Progress is well under way toward the goal of achieving full accessibility at 80% of Metra stations (accounting for 88% of system boardings).

II. IMPLEMENTATION STRATEGY

I. Rolling Stock

Acquisition of 173 accessible cab cars for the diesel lines will occur between 1992 and 1995. The car specification has been written, and the remaining bid documents are currently being prepared. It is anticipated that the contract will be



FLOOR PLAN AND ELEVATION
ACCESSIBLE CAB-CONTROL CARS

**All dimensions in feet-inches
(No metric equivalents shown)**

let by the second quarter of 1990. An exact delivery date will depend on the manufacturer, prototyping needs, and the time required to "tool up" the assembly line. Metra's best estimate is that 22 months will elapse between contract execution and the commencement of delivery. This would put delivery of the first car at about January 1, 1992. It is further estimated that production could occur at a rate of two cars per week thereafter. These dates do not allow for contingencies, however, and must be considered approximate at this time.

As the accessible cab cars are delivered, they will most likely be placed into service on a line-by-line basis, as opposed to spreading them throughout the system. The selection of lines and trains to be made accessible, and the order of selection, will be based on both operating requirements and the desire to match availability of accessible service with demand. In making this decision, Metra will analyze ridership patterns from the Rail Corridor Accessibility Program, information contained in the Accessible Railcar Design Project, and input from the newly-formed Metra Mobility Limited Advisory Committee.

Approximately one-half of the 165-car Metra Electric multiple-unit (MU) fleet will be "retrofitted" for accessibility during rehabilitation between FY90 and FY95. In FY90, 13 of the 25 cars scheduled for rehabilitation will be made accessible. After that, some 20 cars per year will be made accessible, until a total of 83 cars are accessible to the disabled. As a result, at least one car in each consist will be wheelchair accessible.

It has been estimated that the cost of providing one accessible car on every diesel train will add about \$37.3 million to Metra's railcar acquisition cost. Based on a total of 173 cars, the cost of accessibility provisions for each accessible cab car averages about \$215,000. Capital cost components include the actual provision of new features such as lifts and tie-downs, as well as the difference in cost between trailer cars and cabs to the extent cab-car acquisition is being accelerated to achieve accessibility. In addition to the capital cost, a total of approximately \$235 thousand will be incurred annually to cover operating expenses.

The cost of accessibility features for the 83 MU cars totals approximately \$8.3 million, or about \$100 thousand per car. Capital components include, but are not limited to: the replacement of a number of existing fixed seats with retractable seats; installation of wheelchair restraining devices; modification of interior panels to allow for proper clearances for wheelchairs; and modification of vestibule platforms for bridging the gap between vestibule and station platforms. Additional operating costs for the Electric line have not been identified at this time.

2. Stations

Attached as Appendix A is Metra's Draft Station Accessibility Plan. Included is a list of accessible stations by line as well as the planned improvements. Figure 3 summarizes Metra's current plan for, and status of, accessible stations. Inaccessible stations will be made accessible in accordance with the regular capital improvements program, consistent with the Architectural Barriers Act and the Americans with Disabilities Act, and regulations promulgated pursuant to this legislation. With particular respect to the Americans with Disabilities Act, final implementing regulations not be available for some time, and plan revisions may be necessary subsequent to any final rule-making at the federal level.

3. Special Services

The Rail Corridor Accessibility Program (RCAP) will have a \$2 million budget for 1990; the budget will increase 10% annually thereafter. However, service on RCAP will be phased out as the various rail lines become accessible. Until Metra has determined which lines will become mainline-accessible first, second, etc., an exact budget cannot be determined for the years beyond 1991.

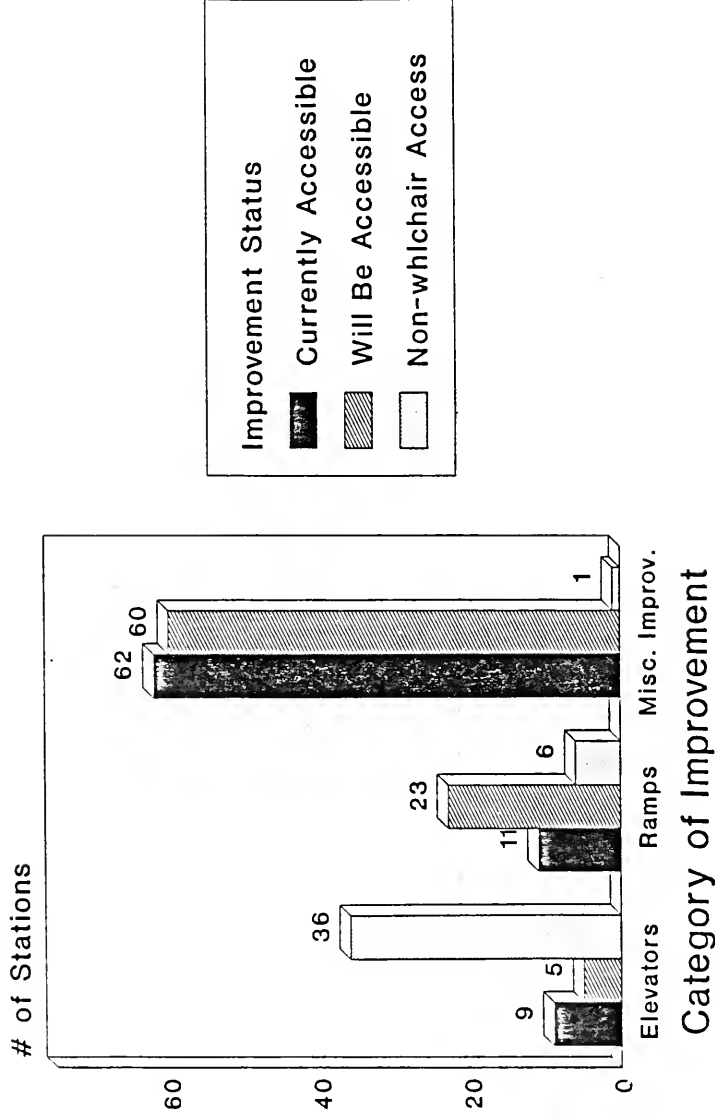
Based on the current per-trip cost of \$58 and the 1990 budget of \$2 million, approximately 94 one-way trips or 47 round trips will be provided each day, seven days per week. This is about 34,500 annual one-way trips. Assuming that the 10% annual budget increase will likely be equalled by increased contractor costs, ridership will remain fairly steady, at least until the accessible railcars come on-line and RCAP service is reduced.

Beginning in 1990, the RTA eligibility criteria for special services will be adopted. This was recommended by Metra's Mobility Limited Advisory Committee, and is currently under review by the Metra Board of Directors.

RCAP will continue to be administered by Pace. The contract(s) for service will be re-bid annually or bi-annually. Opportunities to coordinate RCAP service with accessible CTA and Pace services throughout the region will be explored. One proposed method of improving efficiency is the "interceptor station" concept presently being considered. Under this concept, three to five outlying CTA rapid transit stations will be designated in-city drop-off/pick-up points. Riders may transfer here to CTA service so as to avoid traveling to the Central Area when the final destination is elsewhere in Chicago. The RCAP service period will be expanded to include Sundays, and hours will be 6am - 10pm Sunday through Thursday, and 6am - midnight Friday and Saturday.

METRA STATION ACCESSIBILITY PLAN

Figure 3: Current & Planned Improvements



III. THE PLANNING PROCESS

Many details of the Metra Accessibility Plan remain unknown or undecided at this time, due to lack of information or uncertainty with respect to future conditions and contingencies that may arise. The Plan will, over time, become more detailed and may change in some respects. As a means of ensuring that the Plan evolves in a way that is responsive to the needs of the disabled, a Metra Mobility Limited Advisory Committee has been established to guide Plan refinement and to monitor implementation. The minutes of the first two meetings of the Metra MLAC are attached as Appendix B, and provide a record of additional decisions made with respect to accessibility issues. Future meeting minutes will record the resolution of additional issues as they arise, and may be regarded as included by reference in the Metra Accessibility Plan.

Additional planning process elements include activities such as review of detailed designs of new and rehabilitated railcars and ongoing refinement of the Station Accessibility Plan based on field observations of existing conditions.

Appendix A

Metra Station Accessibility Plan

STATION ACCESS PLANNING AND IMPLEMENTATION STATUS
-- Updated June 1989 --

Requirements that buildings and facilities be made accessible to handicapped persons exist at both the State and Federal levels, and are separate and distinct from any requirements governing service planning and provision. Statutory authority for State regulations pertinent to accessibility for the handicapped is provided by Chapter III 1/2 of the Illinois Revised Statutes (1979). The State regulations are set forth by the Illinois Capital Development Board (ICDB). The Federal regulations are promulgated by the General Services Administration (GSA) under the authority of sections of the Architectural Barriers Act of 1968.

The State regulations apply "to all public buildings and site facilities of a permanent or temporary nature, open to and usable by the public, including new construction, remodeling, and rehabilitation". The Federal regulations apply to any building or facility, which is funded by the Federal government, and "the intended use for which will require either that the building or facility be accessible to the public or may result in the employment therein of physically handicapped persons".

Because these "architectural regulations" have their own distinct statutory basis, and because they are aimed primarily at the ambulatory and semi-ambulatory disabled, compliance with these requirements cannot be dependent upon the development of a wheelchair accessible railcar. For example, many of the design standards are meant to benefit people who can walk but have hearing or visual impairments. (These standards were the impetus behind the Station Sign Program and the incorporation of tactile strips as a standard design feature on new platforms.) Other standards improve access for those who have difficulty walking (e.g., arthritis victims unable to mount steep stairways) but who can and do ride Metra trains. At well over half of the stations in the region, compliance with State and Federal design standards is virtually cost-free and is being accomplished almost automatically as the Metra station rehabilitation program brings the region's older rail stations up to 1980's standards. Intelligent application of the State and Federal standards has, often at no additional cost, removed many obstacles that would otherwise present difficulties to the many "disabled" who use Metra services.

To ensure continuation of progress toward convenient accessibility to stations by Metra riders, a Station Accessibility Plan and Status Report is offered here based on a review of the physical layout of station sites in the region. The plan, as it now stands, will result in 170 out of 213 stations (80%) being fully accessible as part of Metra's ongoing station improvement program. These stations account for 88% of all Metra boardings.

Stations not designated to be made fully accessible are all "special case" stations and require a fairly complicated discussion as to the rationale. Even a simplified understanding can be gained only by keeping in mind the following points:

- Both the State and Federal accessibility standards are designed with new construction in mind and, for new construction, insist on full accessibility, including accessibility for wheelchairs to all usable spaces in the building and its site.
- For rehabilitation projects, the regulations essentially aim at bringing the rehabilitated building and site up to new construction standards. There are exceptions granted on the basis of fairly complex formulas that may take into account such things as: floor area of the structure; cost of the rehabilitation project; replacement value of the facility; and distance from entrances to site property lines. A major complicating factor is the difficulty of relating terminology in the regulations to the unique features of a commuter rail station (e.g., is the platform considered "structure" or "site"?).
- Almost all Metra station improvement projects are rehabilitations of existing structures.

Simply put, depending on how the regulations are interpreted, "special case" stations could be viewed as either fully subject to the new construction standards or exempt.

The Table 1 presents a detailed summary of the Station Accessibility Plan and Status Report which arrays the number of stations in the Metra system according to three categories of accessibility status. Categories include: 1) stations that are currently fully accessible (or are in the process of becoming accessible), 2) stations that are proposed to be made fully accessible, or 3) stations that will not be accessible to wheelchair users. Within each status type, the number of stations are further broken down by the design feature that would be required to meet new construction standards (i.e., to be wheelchair accessible). Three types of design features are involved, 1) stations requiring elevators, 2) stations that would use ramps to replace or supplement stairs, or 3) stations that would require miscellaneous improvements (e.g., curb-cuts). As can be seen, the matrix results in nine separate categories, matching status with design feature, and showing the number of stations in each category. To provide additional detail, each category or "cell" in the matrix is lettered, and lists of stations in each category are included in Table 2. Appendix A provides a listing of stations by category sorted by rail line and mile post.

Of particular note are the highlighted "special case" stations, which can be characterized by two things:

- 1) Inability to apply the architectural regulations in an absolutely clear and consistent fashion, and;
- 2) Significantly higher-than-average costs or structural problems associated with achieving the new construction standards.

To resolve this situation, a number of stations were selected from among the "special cases", to be built to fully accessible new construction standards. The remaining stations were chosen to comply with rehabilitation standards only (and hence will be accessible to all disabled people except wheelchair users). To be selected for improvements to new construction standards, a "special case" station generally had to exhibit high ridership volumes and/or occupy a critical point in the system, such as a high-transfer location or proximity to an institution likely to generate disabled riders. Because of cost and structural considerations, some high-volume stations are not proposed for improvement to new construction standards because a nearby station is or will be accessible. Altogether, 28 "special case" stations were selected for improvement to new construction standards (i.e., categories D and E), which will result in their being made accessible to all disabled, including wheelchair users. A total of 43 "special case" stations will be brought up to the applicable rehabilitation standards only.

In conclusion, it is believed that the Plan, viewed from a systemwide perspective, represents a reasonable and intelligent interpretation of the applicable regulations, and will achieve a high degree of accessibility for the disabled at a reasonable cost.

TABLE 1

METRA STATION ACCESSIBILITY PLAN SUMMARY
Existing and Planned Improvements Showing "Special Cases"
(June 1989)

Accessibility Status of Stations	Major Design Feature that Would be Required If New Construction Standards Were Applicable and Had to be Met				All Stations
	Stations that would Require Elevator(s) to Supplement Stairways	Stations that would Require Ramp(s) to Replace or Supplement Stairways	Stations that would Require Various Miscel- laneous Improvements		
New construction standards are currently met - These stations are now fully accessible	9* A	11* B	62* C	82*	
New construction standards will be met - These stations will be fully accessible upon rehabilitation	5 D	23 E	60 F	88	
Rehabilitation standards will be met - These stations will be acces- sible to all but wheelchair users	36 G	6 H	1 I	43	
	50	40	123	213	

#

X

---> Indicates number of stations
in each category.

----> Cell identifier. Refer to attached tables
for the list of stations in each category.



---> Shading Indicates "special case" stations.

* Includes stations currently undergoing rehabilitation, to be completed by 1990.

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL A; STATIONS: 9

CATEGORY: STATIONS THAT ARE NOW FULLY ACCESSIBLE DUE TO THE
PROVISION OF ELEVATOR(S).

STATION	CARRIER/LINE	NOTES
1 CHICAGO PASS TERMINAL	C&NW	
2 LASALLE STREET	RI	COMPLETION IN 1990
3 RANDOLPH/SOUTH WATER	ELEC/CSSSB	
4 VAN BUREN STREET	ELEC/CSSSB	
5 WINNETKA	C&NW N	
6 HARVEY	ELEC ML	
7 HOMEWOOD	ELEC ML	COMPLETION IN 1990.
8 FLOSSMOOR	ELEC ML	
9 JOLIET	RI/HER	COMPLETION IN 1990

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL B; STATIONS: 11

CATEGORY: STATIONS THAT ARE NOW FULLY ACCESSIBLE DUE TO THE
PROVISION OF LARGE RAMP(S).

STATION	CARRIER/LINE	NOTES
1 CHICAGO UNION STATION	BN/HER/MIL/NS	ELEVATOR IN 1990
2 LISLE	BN	
3 NAPERVILLE	BN	
4 ROUTE 59	BN	STA TO OPEN JULY 89
5 ROGERS PARK	C&NW N	COMPLETION IN 1990
6 IRVING PARK	C&NW NW	COMPLETION IN 1990
7 WEST CHICAGO	C&NW W	COMPLETION IN 1990
8 211TH ST.	ELEC ML	
9 RICHTON PARK	ELEC ML	
10 UNIVERSITY PARK	ELEC ML	
11 WRIGHTWOOD	NS	

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL C; STATIONS: 62

CATEGORY: STATIONS THAT ARE NOW FULLY ACCESSIBLE, EITHER BECAUSE THEY WERE ORIGINALLY CONSTRUCTED AS SUCH, OR DUE TO MISCELLANEOUS IMPROVEMENTS.

STATION	CARRIER/LINE	NOTES
1 BERWYN	BN	
2 HARLEM AVE.	BN	
3 HOLLYWOOD	BN	
4 BROOKFIELD	BN	
5 WEST HINSDALE	BN	
6 CLARENDON HILLS	BN	
7 WESTMONT	BN	
8 FAIRVIEW AVE.	BN	
9 DOWNERS GROVE	BN	
10 BELMONT	BN	
11 KENILWORTH	C&NW N	
12 GLENCOE	C&NW N	COMPLETION IN 1989
13 RAVINIA	C&NW N	
14 HIGHLAND PARK	C&NW N	
15 LAKE FOREST	C&NW N	
16 LAKE BLUFF	C&NW N	COMPLETION IN 1990
17 NORTH CHICAGO	C&NW N	
18 WAUKEGAN	C&NW N	
19 PARK RIDGE	C&NW NW	
20 DES PLAINES	C&NW NW	
21 ARLINGTON HGHTS.	C&NW NW	
22 ARLINGTON PARK	C&NW NW	
23 PALATINE	C&NW NW	
24 BARRINGTON	C&NW NW	
25 CARV	C&NW NW	
26 CRYSTAL LAKE	C&NW NW	
27 BERKELEY	C&NW W	
28 ELMHURST	C&NW W	
29 LOMBARD	C&NW W	
30 GLEN ELLYN	C&NW W	
31 GENEVA	C&NW W	
32 SUMMIT	HERITAGE	
33 WILLOW SPRNGS	HERITAGE	
34 LEMONT	HERITAGE	
35 EDGEBROOK	MILW N	
36 MORTON GROVE	MILW N	
37 GLENVIEW	MILW N	
38 NORTHBROOK	MILW N	
39 LAKE FOREST	MILW N	
40 LIBERTYVILLE	MILW N	
41 GRAYSLAKE	MILW N	
42 ROUND LAKE	MILW N	
43 FOX LAKE	MILW N	
44 FRANKLIN PARK	MILW W	
45 BENSENVILLE	MILW W	
46 WOOD DALE	MILW W	
47 ITASCA	MILW W	
48 ROSELLE	MILW W	
49 SCHAUMBURG	MILW W	
50 HANOVER PARK	MILW W	
51 BARTLETT	MILW W	
52 NATIONAL ST.	MILW W	
53 BIG TIMBER	MILW W	
54 ASHBURN	NS	
55 OAK LAWN	NS	
56 CHICAGO RIDGE	NS	
57 PALOS PARK	NS	
58 OAK FOREST	RI ML	
59 TINLEY PARK	RI ML	
60 80TH AVE.	RI ML	
61 NEW LENOX	RI ML	
62 103RD	RI/BEV	

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL D; STATIONS: 5

CATEGORY: STATIONS THAT WILL BE FULLY ACCESSIBLE UPON MAJOR
REHABILITATION, WHICH WILL INCLUDE PROVISION OF
ELEVATOR(S).

STATION	CARRIER/LINE
1 DAVIS ST.	C&NW N
2 OAK PARK	C&NW W
3 ROOSEVELT	ELEC ML/CSS
4 59TH ST.	ELEC ML/CSS
5 KENSINGTON	ELEC ML/CSS

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL E; STATIONS: 23

CATEGORY: STATIONS THAT WILL BE FULLY ACCESSIBLE UPON MAJOR REHABILITATION, WHICH WILL INCLUDE PROVISION OF LARGE RAMP(S).

STATION	CARRIER/LINE
1 CICERO	BN
2 HIGHLANDS	BN
3 BELLWOOD	C&NW W
4 COLLEGE AVE.	C&NW W
5 STATE ST.	ELEC BI
6 STEWART RIDGE	ELEC BI
7 WEST PULLMAN	ELEC BI
8 RACINE AVE.	ELEC BI
9 ASHLAND AVE.	ELEC BI
10 BURR OAK	ELEC BI
11 BLUE ISLAND	ELEC BI
12 STONY ISLAND	ELEC SC
13 BRYN MAWR	ELEC SC
14 SOUTH SHORE	ELEC SC
15 WINDSOR PARK	ELEC SC
16 79TH ST.	ELEC SC
17 83RD ST.	ELEC SC
18 87TH ST.	ELEC SC
19 91ST ST.	ELEC SC
20 WESTERN AVE.	MILW N/W
21 GRAYLAND	MILW N
22 DEERFIELD	MILW N
23 WORTH	NS

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL F; STATIONS: 60

CATEGORY: STATIONS THAT WILL BE FULLY ACCESSIBLE AS MAJOR
REHABILITATION OR VARIOUS MISCELLANEOUS IMPROVEMENTS
ARE UNDERTAKEN.

STATION	CARRIER/LINE
1 LA VERGNE	BN
2 RIVERSIDE	BN
3 LA GRANGE RD.	BN
4 STONE AVE.	BN
5 WESTERN SPRINGS	BN
6 HINSDALE	BN
7 AURORA	BN
8 WILMETTE	C&NW N
9 BRAESIDE	C&NW N
10 HIGHWOOD	C&NW N
11 FORT SHERIDAN	C&NW N
12 GREAT LAKES	C&NW N
13 ZION	C&NW N
14 WINTHROP HARBOR	C&NW N
15 GLADSTONE PARK	C&NW NW
16 NORWOOD PARK	C&NW NW
17 EDISON PARK	C&NW NW
18 DEE ROAD	C&NW NW
19 CUMBERLAND	C&NW NW
20 MOUNT PROSPECT	C&NW NW
21 FOX RIVER GRV.	C&NW NW
22 MCHENRY	C&NW NW
23 WOODSTOCK	C&NW NW
24 HARVARD	C&NW NW
25 MAYWOOD	C&NW W
26 MELROSE PARK	C&NW W
27 VILLA PARK	C&NW W
28 WHEATON	C&NW W
29 WINFIELD	C&NW W
30 HEGEWISCH	CSSSE
31 GLENN	HERITAGE
32 LOCKPORT	HERITAGE
33 GOLF	MILW N
34 LONG LAKE	MILW N
35 INGLESIDE	MILW N
36 GALEWOOD	MILW W
37 MARS	MILW W
38 MONT CLARE	MILW W
39 ELMWOOD PARK	MILW W
40 RIVER GROVE	MILW W
41 MANNHEIM	MILW W
42 MEDINAH	MILW W
43 ELGIN	MILW W
44 ORLAND PARK	NS
45 95TH/LONGWOOD	RI ML
46 WASHINGTON HTS.	RI ML
47 VERMONT ST.	RI ML/BEV
48 ROBBINS	RI ML
49 MIDLOTHIAN	RI ML
50 MOKENA	RI ML
51 BRAINERD	RI/BEV
52 91ST	RI/BEV
53 95TH	RI/BEV
54 99TH	RI/BEV
55 107TH	RI/BEV
56 111TH	RI/BEV
57 115TH	RI/BEV
58 119TH	RI/BEV
59 123RD	RI/BEV
60 PRAIRIE	RI/BEV

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL G; STATIONS: 36

CATEGORY: STATIONS THAT WOULD REQUIRE ELEVATOR(S) TO PROVIDE FULL ACCESSIBILITY. ELEVATORS WILL NOT BE PROVIDED AS PART OF ANY PLANNED IMPROVEMENTS.

STATION	CARRIER/LINE
1 HALSTED	BN
2 WESTERN AVE.	BN
3 CLYDE	BN
4 CONGRESS PARK	BN
5 CLYBOURN	C&NW N/NW
6 EVANSTON (MAIN)	C&NW N
7 CENTRAL ST.	C&NW N
8 INDIAN HILL	C&NW N
9 HUBBARD WOODS	C&NW N
10 JEFFERSON PARK	C&NW NW
11 KEDZIE	C&NW W
12 RIVER FOREST	C&NW W
13 18TH ST.	ELEC ML
14 23RD ST.	ELEC ML
15 27TH ST.	ELEC ML
16 47TH ST.	ELEC ML
17 51ST-53RD	ELEC ML
18 55TH-56TH-57TH	ELEC ML
19 63RD ST.	ELEC ML
20 75TH ST	ELEC ML
21 79TH ST	ELEC ML
22 83RD ST.	ELEC ML
23 87TH ST.	ELEC ML
24 91ST ST.	ELEC ML
25 95TH ST.	ELEC ML
26 103RD ST.	ELEC ML
27 107TH ST.	ELEC ML
28 111TH ST.	ELEC ML
29 RIVERDALE	ELEC ML
30 IVANHOE	ELEC ML
31 147TH ST.	ELEC ML
32 HAZEL CREST	ELEC ML
33 CALUMET	ELEC ML
34 OLYMPIA FIELDS	ELEC ML
35 MATTESON	ELEC ML
36 GRESHAM	RI ML

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL H; STATIONS: 6

CATEGORY: STATIONS THAT WOULD REQUIRE LARGE RAMP(S) TO PROVIDE FULL ACCESSIBILITY. RAMPS WILL NOT BE PROVIDED AS PART OF ANY PLANNED IMPROVEMENTS.

STATION	CARRIER/LINE
1 RAVENSWOOD	C&NW N
2 HEALY	MILW N
3 MAYFAIR	MILW N
4 FOREST GLEN	MILW N
5 HERMOSA	MILW W
6 CRAGIN	MILW W

METRA STATION ACCESSIBILITY PLAN -- DETAILS

DETAILS FOR CELL I; STATIONS: 1

CATEGORY: (SEE NOTE BELOW)

STATION	CARRIER/LINE
1 HANSON PARK	MILW W

NOTE:

THIS STATION IS ONE WHICH REQUIRES "MISCELLANEOUS IMPROVEMENTS," BUT WILL NOT BE MADE FULLY ACCESSIBLE. THIS IS BECAUSE, IN THIS CASE, THE "MISCELLANEOUS IMPROVEMENT" NEEDED IS THE RELOCATION OF SEVERAL HUNDRED FEET OF ACTIVE FREIGHT TRACK IN ORDER TO SUFFICIENTLY WIDEN AN INBOUND BOARDING PLATFORM TO ALLOW FOR SAFE WHEELCHAIR CLEARANCE.

APPENDIX A: METRA STATION ACCESSIBILITY PLAN -- IN LINE/MILEPOST ORDER

		MILE POST	1987 WKDY BOARDINGS	CELL CODE	ACCESSIBILITY STATUS
DOWNTOWN STATIONS					
1	CHICAGO PASS TERMINAL	0.0	37,522	A	NOW ACCESSIBLE - ELEVATOR
2	CHICAGO UNION STATION	0.0	39,510	B	RAMPED CURRENTLY; ELEVATOR IN 1990
3	LASALLE STREET	0.0	13,248	A	NOW ACCESSIBLE - ELEVATOR
4	RANDOLPH/SOUTH WATER	0.0	17,509	A	NOW ACCESSIBLE - ELEVATOR
5	VAN BUREN STREET	0.8	7,261	A	NOW ACCESSIBLE - ELEVATOR IN 1990
OUTLYING STATIONS					
6 BN	HALSTED	1.8	37	G	WON'T BE ACCESSIBLE - ELEVATOR
7 BN	WESTERN AVE.	3.8	95	G	WON'T BE ACCESSIBLE - ELEVATOR
8 BN	CICERO	7.0	213	E	WILL BE ACCESSIBLE - RAMPS
9 BN	CLYDE	8.5	129	G	WON'T BE ACCESSIBLE - ELEVATOR
10 BN	LA VERGNE	9.1	346	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
11 BN	BERWYN	9.6	882	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
12 BN	HARLEM AVE.	10.1	758	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
13 BN	RIVERSIDE	11.1	510	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
14 BN	HOLLYWOOD	11.8	170	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
15 BN	BROOKFIELD	12.3	705	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
16 BN	CONGRESS PARK	13.1	149	G	WON'T BE ACCESSIBLE - ELEVATOR
17 BN	LA GRANGE RD.	13.8	1,567	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
18 BN	STONE AVE.	14.2	1,089	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
19 BN	WESTERN SPRINGS	15.5	1,121	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
20 BN	HIGHLANDS	16.4	256	E	WILL BE ACCESSIBLE - RAMPS
21 BN	HINSDALE	16.9	1,194	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
22 BN	WEST HINSDALE	17.8	468	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
23 BN	CLARENDON HILLS	18.3	1,117	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
24 BN	WESTMONT	19.5	1,268	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
25 BN	FAIRVIEW AVE.	20.4	612	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
26 BN	DOWNERS GROVE	21.2	2,090	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
27 BN	BELMONT	22.6	1,460	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
28 BN	Lisle	24.5	2,150	B	NOW ACCESSIBLE - RAMPS
29 BN	NAPERVILLE	28.5	3,791	B	NOW ACCESSIBLE - RAMPS
30 BN	ROUTE 59	31.6	--	B	NOW ACCESSIBLE - RAMPS(STA OPENING JUL 89)
31 BN	AURORA	37.5	985	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
32 C&NW N/W	CLYBURN	2.9	486	G	WON'T BE ACCESSIBLE - ELEVATOR
33 C&NW N	RAVENSWOOD	6.5	511	H	WON'T BE ACCESSIBLE - RAMPS
34 C&NW N	ROGERS PARK	9.4	611	B	NOW ACCESSIBLE - RAMPS IN 1990
35 C&NW N	EVANSTON(MAIN)	11.0	667	G	WON'T BE ACCESSIBLE - ELEVATOR
36 C&NW N	DAVIS ST.	12.0	787	O	WILL BE ACCESSIBLE - ELEVATOR
37 C&NW N	CENTRAL ST.	13.3	1,039	G	WON'T BE ACCESSIBLE - ELEVATOR
38 C&NW N	WILMETTE	14.4	1,375	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
39 C&NW N	KENILWORTH	15.2	532	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
40 C&NW N	INDIAN HILL	15.8	407	G	WON'T BE ACCESSIBLE - ELEVATOR
41 C&NW N	WINNETKA	16.6	671	A	NOW ACCESSIBLE - ELEVATOR
42 C&NW N	HUBBARD WOODS	17.7	502	G	WON'T BE ACCESSIBLE - ELEVATOR
43 C&NW N	GLENCOE	19.2	873	C	NOW ACCESSIBLE - MISC IMPROVEMENTS IN 89
44 C&NW N	BRAESIDE	20.5	313	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS

APPENDIX A: METRA STATION ACCESSIBILITY PLAN -- IN LINE/MILEPOST ORDER

		MILE POST	1987 WKDY BOARDINGS	CELL CODE	ACCESSIBILITY STATUS
45	C&NW N	RAVINIA	21.5	366	C NOW ACCESSIBLE - MISC IMPROVEMENTS
46	C&NW N	HIGHLAND PARK	23.0	1,155	C NOW ACCESSIBLE - MISC IMPROVEMENTS
47	C&NW N	HIGHWOOD	24.5	261	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
48	C&NW N	FORT SHERIDAN	25.7	394	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
49	C&NW N	LAKE FOREST	28.3	729	C NOW ACCESSIBLE - MISC IMPROVEMENTS
50	C&NW N	LAKE BLUFF	30.2	374	C NOW ACCESSIBLE - MISC IMPROVEMENTS IN 90
51	C&NW N	GREAT LAKES	32.2	96	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
52	C&NW N	NORTH CHICAGO	33.7	145	C NOW ACCESSIBLE - MISC IMPROVEMENTS
53	C&NW N	WAUKEGAN	35.9	644	C NOW ACCESSIBLE - MISC IMPROVEMENTS
54	C&NW N	ZION	42.1	85	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
55	C&NW N	WINTHROP HARBOR	44.5	24	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
56	C&NW NW	IRVING PARK	7.0	225	B NOW ACCESSIBLE - RAMPS IN 1990
57	C&NW NW	JEFFERSON PARK	9.1	537	G WON'T BE ACCESSIBLE - ELEVATOR
58	C&NW NW	GLADSTONE PARK	10.1	67	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
59	C&NW NW	NORWOOD PARK	11.4	170	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
60	C&NW NW	EDISON PARK	12.6	360	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
61	C&NW NW	PARK RIDGE	13.5	801	C NOW ACCESSIBLE - MISC IMPROVEMENTS
62	C&NW NW	DEE ROAD	15.0	432	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
63	C&NW NW	DES PLAINES	17.1	1,159	C NOW ACCESSIBLE - MISC IMPROVEMENTS
64	C&NW NW	CUMBERLAND	18.6	546	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
65	C&NW NW	MOUNT PROSPECT	20.0	2,253	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
66	C&NW NW	ARLINGTON HGHTS.	22.8	2,953	C NOW ACCESSIBLE - MISC IMPROVEMENTS
67	C&NW NW	ARLINGTON PARK	24.4	1,834	C NOW ACCESSIBLE - MISC IMPROVEMENTS
68	C&NW NW	PALATINE	26.8	1,919	C NOW ACCESSIBLE - MISC IMPROVEMENTS
69	C&NW NW	BARRINGTON	31.9	1,945	C NOW ACCESSIBLE - MISC IMPROVEMENTS
70	C&NW NW	FOX RIVER GRV.	37.3	228	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
71	C&NW NW	CARY	38.6	516	C NOW ACCESSIBLE - MISC IMPROVEMENTS
72	C&NW NW	CRYSTAL LAKE	43.2	1,084	C NOW ACCESSIBLE - MISC IMPROVEMENTS
73	C&NW NW	MCHENRY	50.6	199	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
74	C&NW NW	WOODSTOCK	51.6	308	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
75	C&NW NW	HARVARD	63.1	112	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
76	C&NW W	KEDZIE	3.6	31	G WON'T BE ACCESSIBLE - ELEVATOR
77	C&NW W	OAK PARK	8.5	566	D WILL BE ACCESSIBLE - ELEVATOR
78	C&NW W	RIVER FOREST	9.7	192	G WON'T BE ACCESSIBLE - ELEVATOR
79	C&NW W	MAYWOOD	10.5	115	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
80	C&NW W	MELROSE PARK	11.3	143	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
81	C&NW W	BELLWOOD	12.6	214	E WILL BE ACCESSIBLE - RAMPS
82	C&NW W	BERKELEY	14.3	246	C NOW ACCESSIBLE - MISC IMPROVEMENTS
83	C&NW W	ELMHURST	15.7	1,787	C NOW ACCESSIBLE - MISC IMPROVEMENTS
84	C&NW W	VILLA PARK	17.8	1,328	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
85	C&NW W	LOMBARD	19.9	1,385	C NOW ACCESSIBLE - MISC IMPROVEMENTS
86	C&NW W	GLEN ELLYN	22.4	2,280	C NOW ACCESSIBLE - MISC IMPROVEMENTS
87	C&NW W	COLLEGE AVE.	23.8	993	E WILL BE ACCESSIBLE - RAMPS
88	C&NW W	WHEATON	25.0	2,132	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
89	C&NW W	WINFIELD	27.5	546	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
90	C&NW W	WEST CHICAGO	30.3	474	B NOW ACCESSIBLE - RAMPS IN 1990
91	C&NW W	GENEVA	35.5	1,124	C NOW ACCESSIBLE - MISC IMPROVEMENTS
92	C&SSB	HEGEWISCH	19.0	1,742	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
93	ELEC HL/CSS	ROOSEVELT	1.4	302	D WILL BE ACCESSIBLE - ELEVATOR

APPENDIX A: METRA STATION ACCESSIBILITY PLAN -- IN LINE/MILEPOST ORDER

		MILE POST	1987 WKDY BOARDINGS	CELL CODE	ACCESSIBILITY STATUS
94	ELEC ML	18TH ST.	2.2	11	G WON'T BE ACCESSIBLE - ELEVATOR
95	ELEC ML	23RD ST.	2.7	175	G WON'T BE ACCESSIBLE - ELEVATOR
96	ELEC ML	27TH ST.	3.2	135	G WON'T BE ACCESSIBLE - ELEVATOR
97	ELEC ML	47TH ST.	5.9	35	G WON'T BE ACCESSIBLE - ELEVATOR
98	ELEC ML	51ST-53RD	6.5	570	G WON'T BE ACCESSIBLE - ELEVATOR
99	ELEC ML	55TH-56TH-57TH	7.0	527	G WON'T BE ACCESSIBLE - ELEVATOR
100	ELEC ML/CSS	59TH ST.	7.4	836	D WILL BE ACCESSIBLE - ELEVATOR
101	ELEC ML	63RD ST.	7.9	120	G WON'T BE ACCESSIBLE - ELEVATOR
102	ELEC ML	75TH ST	9.3	29	G WON'T BE ACCESSIBLE - ELEVATOR
103	ELEC ML	79TH ST	10.0	113	G WON'T BE ACCESSIBLE - ELEVATOR
104	ELEC ML	83RD ST.	10.4	48	G WON'T BE ACCESSIBLE - ELEVATOR
105	ELEC ML	87TH ST.	10.9	57	G WON'T BE ACCESSIBLE - ELEVATOR
106	ELEC ML	91ST ST.	11.4	35	G WON'T BE ACCESSIBLE - ELEVATOR
107	ELEC ML	95TH ST.	12.0	43	G WON'T BE ACCESSIBLE - ELEVATOR
108	ELEC ML	103RD ST.	13.0	51	G WON'T BE ACCESSIBLE - ELEVATOR
109	ELEC ML	107TH ST.	13.5	37	G WON'T BE ACCESSIBLE - ELEVATOR
110	ELEC ML	111TH ST.	14.0	42	G WON'T BE ACCESSIBLE - ELEVATOR
111	ELEC ML/CSS	KENSINGTON	14.5	862	D WILL BE ACCESSIBLE - ELEVATOR
112	ELEC ML	RIVERDALE	17.3	698	G WON'T BE ACCESSIBLE - ELEVATOR
113	ELEC ML	IVANHOE	18.2	1,365	G WON'T BE ACCESSIBLE - ELEVATOR
114	ELEC ML	147TH ST.	19.0	1,321	G WON'T BE ACCESSIBLE - ELEVATOR
115	ELEC ML	HARVEY	20.0	1,528	A NOW ACCESSIBLE - ELEVATOR
116	ELEC ML	HAZEL CREST	22.3	792	G WON'T BE ACCESSIBLE - ELEVATOR
117	ELEC ML	CALUMET	22.8	1,052	G WON'T BE ACCESSIBLE - ELEVATOR
118	ELEC ML	HOMewood	23.5	1,715	A NOW ACCESSIBLE - ELEVATOR IN 1990
119	ELEC ML	FLOSSMOOR	24.9	1,514	A NOW ACCESSIBLE - ELEVATOR
120	ELEC ML	OLYMPIA FIELDS	26.6	338	G WON'T BE ACCESSIBLE - ELEVATOR
121	ELEC ML	211TH ST.	27.6	672	B NOW ACCESSIBLE - RAMPS
122	ELEC ML	MATTESON	28.2	1,492	G WON'T BE ACCESSIBLE - ELEVATOR
123	ELEC ML	RICHTON PARK	29.3	1,619	B NOW ACCESSIBLE - RAMPS
124	ELEC ML	UNIVERSITY PARK	31.5	628	B NOW ACCESSIBLE - RAMPS
125	ELEC BI	STATE ST.	15.6	91	E WILL BE ACCESSIBLE - RAMPS
126	ELEC BI	STEWART RIDGE	16.0	64	E WILL BE ACCESSIBLE - RAMPS
127	ELEC BI	WEST PULLMAN	16.7	44	E WILL BE ACCESSIBLE - RAMPS
128	ELEC BI	RACINE AVE.	17.0	42	E WILL BE ACCESSIBLE - RAMPS
129	ELEC BI	ASHLAND AVE.	17.9	176	E WILL BE ACCESSIBLE - RAMPS
130	ELEC BI	BURR OAK	18.4	325	E WILL BE ACCESSIBLE - RAMPS
131	ELEC BI	BLUE ISLAND	18.9	366	E WILL BE ACCESSIBLE - RAMPS
132	ELEC SC	STONY ISLAND	9.1	192	E WILL BE ACCESSIBLE - RAMPS
133	ELEC SC	BRYN MAWR	9.7	153	E WILL BE ACCESSIBLE - RAMPS
134	ELEC SC	SOUTH SHORE	10.3	338	E WILL BE ACCESSIBLE - RAMPS
135	ELEC SC	WINDSOR PARK	10.9	293	E WILL BE ACCESSIBLE - RAMPS
136	ELEC SC	79TH ST.	11.5	236	E WILL BE ACCESSIBLE - RAMPS
137	ELEC SC	83RD ST.	12.0	505	E WILL BE ACCESSIBLE - RAMPS
138	ELEC SC	87TH ST.	12.5	303	E WILL BE ACCESSIBLE - RAMPS
139	ELEC SC	91ST ST.	13.0	881	E WILL BE ACCESSIBLE - RAMPS
140	HERITAGE	GLENW	10.3	93	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
141	HERITAGE	SUMMIT	11.9	107	C NOW ACCESSIBLE - MISC IMPROVEMENTS
142	HERITAGE	WILLOW SPRNGS	17.5	136	C NOW ACCESSIBLE - MISC IMPROVEMENTS

APPENDIX A: METRA STATION ACCESSIBILITY PLAN -- IN LINE/MILEPOST ORDER

		MILE POST	1987 WKDY BOARDINGS	CELL CODE	ACCESSIBILITY STATUS
143	HERITAGE	LEMONT	25.3	239	C NOW ACCESSIBLE - MISC IMPROVEMENTS
144	HERITAGE	LOCKPORT	32.9	79	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
145	MILW N/W	WESTERN AVE.	2.9	223	E WILL BE ACCESSIBLE - RAMPS
146	MILW N	HEALY	6.4	227	H WON'T BE ACCESSIBLE - RAMPS
147	MILW N	GRAYLAND	8.2	83	E WILL BE ACCESSIBLE - RAMPS
148	MILW N	MAYFAIR	9.0	78	H WON'T BE ACCESSIBLE - RAMPS
149	MILW N	FOREST GLEN	10.2	102	H WON'T BE ACCESSIBLE - RAMPS
150	MILW N	EDGEBROOK	11.6	328	C NOW ACCESSIBLE - MISC IMPROVEMENTS
151	MILW N	MORTON GROVE	14.3	583	C NOW ACCESSIBLE - MISC IMPROVEMENTS
152	MILW N	GOLF	16.2	181	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
153	MILW N	GLENVIEW	17.4	1,546	C NOW ACCESSIBLE - MISC IMPROVEMENTS
154	MILW N	NORTHBROOK	21.1	1,361	C NOW ACCESSIBLE - MISC IMPROVEMENTS
155	MILW N	DEERFIELD	24.2	1,447	E WILL BE ACCESSIBLE - RAMPS
156	MILW N	LAKE FOREST	28.0	325	C NOW ACCESSIBLE - MISC IMPROVEMENTS
157	MILW N	LIBERTYVILLE	35.5	1,010	C NOW ACCESSIBLE - MISC IMPROVEMENTS
158	MILW N	GRAYSLAKE	41.0	294	C NOW ACCESSIBLE - MISC IMPROVEMENTS
159	MILW N	ROUND LAKE	44.0	356	C NOW ACCESSIBLE - MISC IMPROVEMENTS
160	MILW N	LONG LAKE	46.0	59	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
161	MILW N	INGLESIDE	47.8	23	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
162	MILW N	FOX LAKE	49.5	445	C NOW ACCESSIBLE - MISC IMPROVEMENTS
163	MILW W	HERMOSA	5.9	79	N WON'T BE ACCESSIBLE - RAMPS
164	MILW W	CRAGIN	7.0	61	H WON'T BE ACCESSIBLE - RAMPS
165	MILW W	HANSON PARK	7.7	42	I WON'T BE ACCESSIBLE - MISC IMPROVEMENTS
166	MILW W	GALEWOOD	8.6	244	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
167	MILW W	MARS	9.1	114	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
168	MILW W	MONT CLARE	9.5	427	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
169	MILW W	ELMWOOD PARK	10.2	483	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
170	MILW W	RIVER GROVE	11.4	222	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
171	MILW W	FRANKLIN PARK	13.2	533	C NOW ACCESSIBLE - MISC IMPROVEMENTS
172	MILW W	MANHHEIM	14.0	31	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
173	MILW W	BENSENVILLE	17.2	448	C NOW ACCESSIBLE - MISC IMPROVEMENTS
174	MILW W	WOOD DALE	19.1	579	C NOW ACCESSIBLE - MISC IMPROVEMENTS
175	MILW W	ITASCA	21.0	481	C NOW ACCESSIBLE - MISC IMPROVEMENTS
176	MILW W	MEDINAH	23.0	265	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
177	MILW W	ROSELLE	23.9	1,736	C NOW ACCESSIBLE - MISC IMPROVEMENTS
178	MILW W	SCHAUMBURG	26.5	961	C NOW ACCESSIBLE - MISC IMPROVEMENTS
179	MILW W	HANOVER PARK	28.4	855	C NOW ACCESSIBLE - MISC IMPROVEMENTS
180	MILW W	BARTLETT	30.1	805	C NOW ACCESSIBLE - MISC IMPROVEMENTS
181	MILW W	NATIONAL ST.	36.0	183	C NOW ACCESSIBLE - MISC IMPROVEMENTS
182	MILW W	ELGIN	36.6	463	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
183	MILW W	BIG TIMBER	39.8	41	C NOW ACCESSIBLE - MISC IMPROVEMENTS
184	NS	WRIGHTWOOD	11.2	220	B NOW ACCESSIBLE - RAMPS
185	NS	ASHBURN	12.6	322	C NOW ACCESSIBLE - MISC IMPROVEMENTS
186	NS	OAK LAWN	15.2	704	C NOW ACCESSIBLE - MISC IMPROVEMENTS
187	NS	CHICAGO RIDGE	16.8	425	C NOW ACCESSIBLE - MISC IMPROVEMENTS
188	NS	WORTH	18.2	335	E WILL BE ACCESSIBLE - RAMPS
189	NS	PALOS PARK	20.3	151	C NOW ACCESSIBLE - MISC IMPROVEMENTS
190	NS	ORLAND PARK	23.6	359	F WILL BE ACCESSIBLE - MISC IMPROVEMENTS
191	RI ML	GRESHAM	9.8	179	G WON'T BE ACCESSIBLE - ELEVATOR

APPENDIX A: METRA STATION ACCESSIBILITY PLAN -- IN LINE/MILEPOST ORDER

		MILE POST	1987 WKDY BOARDINGS	CELL CODE	ACCESSIBILITY STATUS
192 RI ML	95TH/LONGWOOD	10.9	91	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
193 RI ML	WASHINGTON HTS.	12.0	95	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
194 RI ML/BEV	VERMONT ST.	16.4	914	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
195 RI ML	ROBBINS	17.2	53	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
196 RI ML	MIDLOTHIAN	18.4	1,133	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
197 RI ML	OAK FOREST	20.4	1,570	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
198 RI ML	TINLEY PARK	23.5	1,106	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
199 RI ML	80TH AVE.	25.1	1,178	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
200 RI ML	HOKENA	29.6	504	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
201 RI ML	NEW LENOX	34.0	562	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
202 RI/HER	JOLIET	40.2	456	A	NOW ACCESSIBLE - ELEVATOR IN 1990
203 RI/BEV	BRAINERD	10.6	213	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
204 RI/BEV	91ST	11.3	604	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
205 RI/BEV	95TH	11.7	795	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
206 RI/BEV	99TH	12.3	839	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
207 RI/BEV	103RD	12.8	1,206	C	NOW ACCESSIBLE - MISC IMPROVEMENTS
208 RI/BEV	107TH	13.3	626	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
209 RI/BEV	111TH	13.8	946	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
210 RI/BEV	115TH	14.3	298	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
211 RI/BEV	119TH	14.8	484	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
212 RI/BEV	123RD	15.2	71	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS
213 RI/BEV	PRAIRIE	15.8	90	F	WILL BE ACCESSIBLE - MISC IMPROVEMENTS

Appendix B

Metra

Mobility Limited Advisory Committee

Meeting Minutes

Metra

MOBILITY LIMITED ADVISORY COMMITTEE

Minutes of the October 20, 1989 Meeting

Mr. Pagano opened this meeting of Metra's newly formed Mobility Limited Advisory Committee by stating that this will not be the only meeting of this group, but that it is the first of a series of meetings to discuss Metra's accessibility program and to solicit input from representatives of the disabled community.

Discussion of the agenda items was preceded by Mr. Pagano's summary of the decisions reached at the September 15th Metra Board Meeting. The Board of Directors made the decision to acquire 173 accessible cab cars for the diesel lines. The cars will be lift-equipped and will provide space, at least initially, for three wheelchairs. The accessible cab car will also contain an accessible washroom. With respect to the Rail Corridor Accessibility Program (RCAP), the Board established a budget of \$2 million for 1990 with a 10% funding increase for each subsequent year. However, RCAP will be phased out as the accessible railcars come on-line.

The accessible cab car was the first topic of discussion. Mr. Benham distributed a drawing of the recommended design from the Accessible Railcar Design Project as he described the car. A copy of the drawing is attached. The accessible car, like Metra's other vehicles, is a gallery-style bi-level car. It will be equipped with a "Ricon-style" lift on both sides of the car (for boarding and alighting on the appropriate platform at each station). The interior, as it is currently designed, would have three wheelchair positions. Mr. Benham added that additional wheelchair positions could be provided in the future if demand exceeds the current estimate. The wheelchair positions will be equipped with tie-downs. Since there is no universal tie-down (i.e., one that can accommodate all chairs), Mr. Benham requested that anyone who is aware of a tie-down that can accommodate many types of wheelchairs and tri-wheelers contact him with the information. He further stated that because Metra trains provide a fairly smooth ride, some people may not need to use a tie-down. In any case, the use of the tie-down would be voluntary. Several committee members mentioned cities where tie-downs are not provided on rail vehicles (San Diego and Atlanta), and suggested that perhaps they would not be needed. Mr. Pagano responded by saying that there may be certain requirements for accessible vehicles (including provision of tie-downs) that are or will be mandated by the Federal government or by liability considerations; these will become known in time.

As part of the discussion of the accessible railcar, Mr. Pagano raised the subject of the Americans with Disabilities Act (ADA) and Metra's response to it. He stated that Metra is in disagreement with one issue only: the requirement that every car be accessible. Metra believes that one car per train is sufficient, especially since more wheelchair spaces could be added to the vehicle if needed. Mr. Pagano stressed the fact that Metra is not lobbying against the ADA; Metra firmly believes that accessible cab cars will meet the needs of the disabled without incurring the added costs that a broader requirement would entail. The agency would like to see this requirement re-worded to the effect that "at least one car per train will be made accessible".

There was concern expressed by those present that Metra's planned three spaces would not sufficiently meet future demand. Mr. Benham stated that the cab car could be modified (by removing conventional seats, and installing flip seats and the hardware for tie-downs) to provide 16 wheelchair spaces on each side of the train, or 32 spaces if the entire car were modified. Mr. Pagano said that if ridership by people in wheelchairs increased to the point where an additional accessible car were needed, it would be provided. This is consistent with the way demand for service is currently handled. Mr. Benham added that on some trains (the longest trains in the peak hours), two cab cars are present; this provides a buffer with which to meet at least some additional demand. The group agreed that one accessible car per train, then, is reasonable and practical.

Ms. Moran questioned the decision to provide accessible washrooms in light of the associated expense. She stated that disabled people are transported in vans for up to several hours, with no washroom. Further, she stated that if someone in a wheelchair were tied-down, they wouldn't be very likely to use such a facility anyway. Mr. Pagano explained the reasons for making the toilet on the cab car accessible. Current legislation requires that facilities provided for the able-bodied must be provided for the disabled; therefore, Metra must provide accessible bathrooms since they are provided for the able-bodied and because Metra's passengers use the facilities and would not want them eliminated. Also, it would be more difficult to retrofit the cars for accessible washrooms, if they were later desired or required, than to have them built into the car at the start. Mr. Pagano said that if a person were strapped down and wanted to use the washroom, the conductor could help with the tie-down. He added that the ambulatory disabled (i.e., those with walkers, crutches, etc.) would also benefit from the accessible washroom. The committee then agreed that it would be prudent to have the new cab cars fitted with accessible washrooms.

The implementation of the accessible railcar program was presented by Mr. Pagano. Metra intends to go out to bid for the cars during the first or second quarter of 1990. The complete order will

probably be delivered by 1995, with the first cars being received about two years after acceptance of the bid. As the accessible cab cars are delivered, they will be placed into service on a line-by-line basis, as opposed to spreading them throughout the system. Which line will be accessible first, second, etc. does not have to be decided for awhile. In making this decision, Metra will analyze ridership patterns from the Rail Corridor Accessibility Program and other information. This committee will provide input at the appropriate time. Mr. Dempsey cautioned against putting an overemphasis on RCAP data. He said that because a large portion of the Rock Island line is in the City of Chicago, disabled people living in that corridor are not allowed to use RCAP now for travel to the downtown; however, they would use Metra when the cars are accessible. Metra will take this into consideration.

The next topic was the Metra Electric (formerly Illinois Central Gulf) railcars. Mr. Pagano explained that making the Electric line accessible was not as difficult as making the diesel lines accessible. Because the Electric cars are boarded from high-level platforms (vs. low-level for diesel), boarding is not a major problem once the station becomes accessible. Metra is not buying new cars to make the Electric fleet accessible; they will become accessible as they are rehabilitated. The entire fleet is to be rehabbed during the next five years, and one-half of the fleet will be made fully accessible to the disabled. These cars are operated as "married pairs" (i.e., two cars are always run together). By making half of the fleet accessible, at least one car per train will be accessible. Since the minimum number of cars per train is two, the larger trains will have more than one accessible car. (50% of the cars in any train will be accessible.) In the next bid to rehabilitate these cars, Metra will ask the manufacturer what modifications are necessary. It is expected that some kind of a "gap filler" will be required to bridge the horizontal gap between the platform and the car floor. In addition, interior modifications will be needed (e.g., removal of seats, widening of aisles, and installation of tie-downs). Because the Metra Electric trains have no washrooms at all, accessible washrooms will not be provided.

In response to concerns about a possible vertical gap between the platform and the car floor, Mr. Benham stated that any "gap-filler" supplied by the manufacturer should bridge both the horizontal and vertical gaps simultaneously. He added that in the event of a small gap remaining, the train crew will provide assistance when needed.

The next item on the agenda was the RCAP program. Based on the \$2 million annual budget for next year and the current cost of \$58 per trip, approximately 34,500 trips could be provided during 1990 ($2,000,000 \div 58 = 34,483$). How these trips will be provided has yet to be determined, Mr. Pagano said. The first issue that will affect the number of riders who get rides is the eligibility

criteria. (Mr. Pagano explained that RCAP has been limited to wheelchair users because it was felt that Metra's conductors generally assist passengers in boarding the train, unlike the practices generally followed by rapid transit or bus systems. Metra believed, therefore, that people with ambulatory disabilities could get on and off the train.) The second issue is the desire on the part of the disabled community to expand the hours of service. (Current hours are 6:00 AM to 7:00 PM). The third issue is holidays and weekends; there is currently no service on Sundays or major holidays. Metra wants the input of the disabled community on these issues, with the understanding that the number of trips (based on the established budget) is a given.

In answer to questions about why the number of trips must be limited at all when they aren't limited for the able-bodied population, Mr. Pagano replied that Metra must meet a legislatively mandated farebox recovery ratio. Metra would have to cut other services and needed capital programs in order to increase the RCAP budget and still meet the recovery ratio. Mr. Pagano noted that the \$2 million budget was the figure authorized by the Board and that he really was in no position to change the figure, but would advise the Board of the group's dissatisfaction with the amount. For now, he continued, assuming there is a \$2 million budget, the committee should discuss how the limited number of trips will be distributed.

After expressing his opinion that the \$2 million annual budget is inadequate, Mr. Jones stated that eligibility must be expanded to include the non-wheelchair disabled population. The other representatives of the disabled community agreed. Mr. Pagano will propose to the Board that Metra adopt the RTA's definition of severely mobility limited as the new RCAP eligibility criteria'.

The RTA's eligibility criteria for special services are as follows:

- those who have great difficulty or cannot climb three standard transit steps (when vehicles are not equipped with wheelchair lifts);
- those who have great difficulty or cannot board a vehicle equipped with a wheelchair lift (when full performance accessibility is reached);
- those with a mental functional limitation that prevents a person from independently using, or learning to use, fixed route public transit service;
- the legally blind that are unable to successfully complete a mobility training course; or
- legally blind and deaf (uncorrectable).

The next thing to be decided was the hours and days of service. The committee unanimously endorsed 7-days-a-week service. Although 24-hour service was suggested, it was pointed out by Mr. Nugent that Metra service does not operate 24 hours a day. The committee then agreed that the ideal is to have the RCAP service provided during hours that are comparable to the hours of service for the able-bodied. After some discussion, it was decided that the recommended hours of service would be from 6:00 AM to 10:00 PM on Sunday through Thursday, and from 6:00 AM to 12:00 AM on Friday and Saturday.

Another issue was brought up by the committee: the RCAP requirement that people have to travel from locations within the City of Chicago (but outside the Central Area) to the suburbs via the Central Area. For example, a rider travelling between Jefferson Park on the north side of the city and Arlington Heights (on the same "rail line") must travel downtown on CTA Special Services in order to use RCAP. The able-bodied are not required to go downtown in order to use Metra service. Mr. Benham and Mr. Pagano explained that the in-city train stations were excluded from the program for security reasons. Another reason for their exclusion was that RCAP cannot afford to carry what are essentially CTA Special Services trips (e.g., a trip from Metra station to Metra station, both within the city, can be made on CTA's Special Services program). This Central Area requirement was described as onerous and costly, both for riders and the service providers (and ultimately Metra). Ms. Moran suggested that riders could be left off at Metra in-city stations but not taken door-to-door within Chicago (since door-to-door would be a CTA trip). Mr. Pagano expressed concern about leaving disabled individuals at a station; if their CTA ride didn't come, they would be stranded. Further, some of these stations present obvious security risks. There was some discussion about disabled people being responsible for themselves vs. the physical constraints that can limit their independence. Mr. Benham suggested that perhaps we could have drop-off/pickup points at some manned CTA stations near the City border. For example, Jefferson Park on the north side, Des Plaines Avenue in the western suburb of Forest Park, and 95th Street on the south side are obvious candidates. Each RCAP corridor could be assigned to one of these "interceptor" stations; the rider would then have the option of going from the suburbs to the Central Area or to an outlying station to await a CTA Special Services ride to an in-city destination. The committee agreed that Metra should pursue the "interceptor" station idea. If it proved to be unworkable, it wouldn't be implemented.

The next issue involved the number of trips that could be provided per day. Given that the budget is set, the number of trips per day, per week, or per month will have to be limited in order to ensure that the budget covers the entire year. If the 34,500 trips per year were distributed equally over each day of the year, the budget would allow for about 94 one-way trips per day, or 47 round

trips. (In August, the program provided an average of 67 one-way trips per day of service.) If the same number of trips were to be provided each day, then 47 people could schedule round trips, and the 48th person to call would not get a trip. Mr. Pagano asked the committee if they wanted the trips spread evenly throughout the week, or a greater number reserved for the weekdays (Monday through Friday) to ensure that worktrips are provided. In response to a question about the number of trips now provided on Saturday, Mr. Pagano said that Metra staff will look into it and get back to this group with the information. After this number is provided, the committee will be able to make an informed decision as to the trip distribution issue. (Pace later provided this information to Metra staff. In August 1989, a total of 88 trips of 1,738 [or 5.1%] were made on the four Saturdays during this month.)

Mr. Pagano then summarized the major points of this meeting:

- the accessible cab car will have an accessible washroom and can be modified to handle additional wheelchair users, if needed;
- one-half of the Metra Electric fleet will be made fully accessible as the cars are rehabbed; and
- recommendations for RCAP (to take effect in January or possibly February 1990) are as follows:
 - eligibility criteria are to be based on the RTA definition of severely mobility limited;
 - hours of service will be 6:00 AM - 10:00 PM for Sunday through Thursday, and 6:00 AM - Midnight for Friday and Saturday;
 - Metra will look into the establishment of two or three outlying CTA stations to be used as "interceptors"; and
 - the committee will determine the desired distribution of trips per day.

Ms. Walberer provided Metra with a list of names of additional people who are interested in participating in Metra's Mobility Limited Advisory Committee meetings. These people have now been added to the list of members and will begin receiving the Minutes and meeting notices.

Subsequent meetings will be held on Friday afternoons from 4:30 to 6:30 PM. The date of the next meeting had not been determined at this time.

Metra

MOBILITY LIMITED ADVISORY COMMITTEE

Minutes of the November 10, 1989 Meeting

With respect to the discussion during the previous meeting of the planned purchase of accessible railcars, the issue of one accessible car per train was raised. Several members of the committee were not satisfied with the conclusion reached at the previous meeting that additional demand in the future would be adequately met by providing additional wheelchair spaces in the accessible cab car. If a large number of wheelchair users wished to board the same train at the same station, then there would be an enormous time delay if only one car (vs. all cars) were lift-equipped. Metra's response was that, based on the consultant's projection, one car with 3 wheelchair spaces would be adequate. However, if demand was significantly higher than expected, then Metra could begin to meet it by modifying the cab car to provide more spaces in the short run; in the long run, the question of ordering more accessible cars would have to be addressed. Several committee members stated that they do not want Metra to oppose any part of the ADA (Americans with Disabilities Act) legislation, including the requirement that all vehicles be accessible. For the record, then, the entire group does not agree that one accessible car per train is adequate or acceptable.

The idea of eliminating the Rail Corridor Accessibility Program (RCAP) as the accessible cars come on-line was discussed. Some committee members feel that RCAP should not be eliminated as the lines become accessible, since full accessibility requires that all stations are accessible and that won't happen in the near future. Metra replied that that is an RTA issue; according to RTA's Regional Plan for the Disabled, once the cars are accessible Metra is not required to provide a paratransit service. That does not mean, however, that the region won't be required to provide it.

The major topic for this meeting was introduced: the distribution of RCAP trips. Based on a \$2 million budget for 1990 and the current average cost per trip, it was previously determined that if trips were distributed evenly throughout the week, 94 one-way trips or 47 round trips could be provided daily. The committee members were asked if they wished the trips to be spread evenly throughout the week or if they wanted a greater number reserved for weekdays. The committee agreed that the trips should be distributed evenly, at least for now. Therefore, 47 round trips, or 94 one-way trips, will be available on each day of the week. This will be reassessed as usage data become available. It was further agreed that up to 50% of the trips would be set aside for

subscriptions, the other 50% available for on-demand (call-in) trips.

The next question was how to distribute trips not used during a given month or quarter. It was decided that meetings would be held quarterly to address the distribution of any excess trips, but that if anything unexpected arises during the first 3 months of service, an "emergency" meeting of this group would be convened to assess the situation.

Implementation of the 1990 RCAP program was discussed next. If Metra and Pace can successfully renegotiate a contract extension with the current providers, the new service could begin as early as January 1st. If Pace/Metra decides to re-bid the contract (due to the extent of the changes being made), then the new program might not begin until perhaps February or even March.

The fact that some of Alpha's vehicles are equipped with wheelchair tie-downs but no seats was mentioned. This will have to be addressed for 1990 since eligibility will expand to allow for use of RCAP by the ambulatory disabled. If the contractors could provide rides to the ambulatory disabled in sedans and charge less for such rides, then it may be possible to adjust the number of trips available. At any rate, the contractors will be informed of the need for different vehicles.

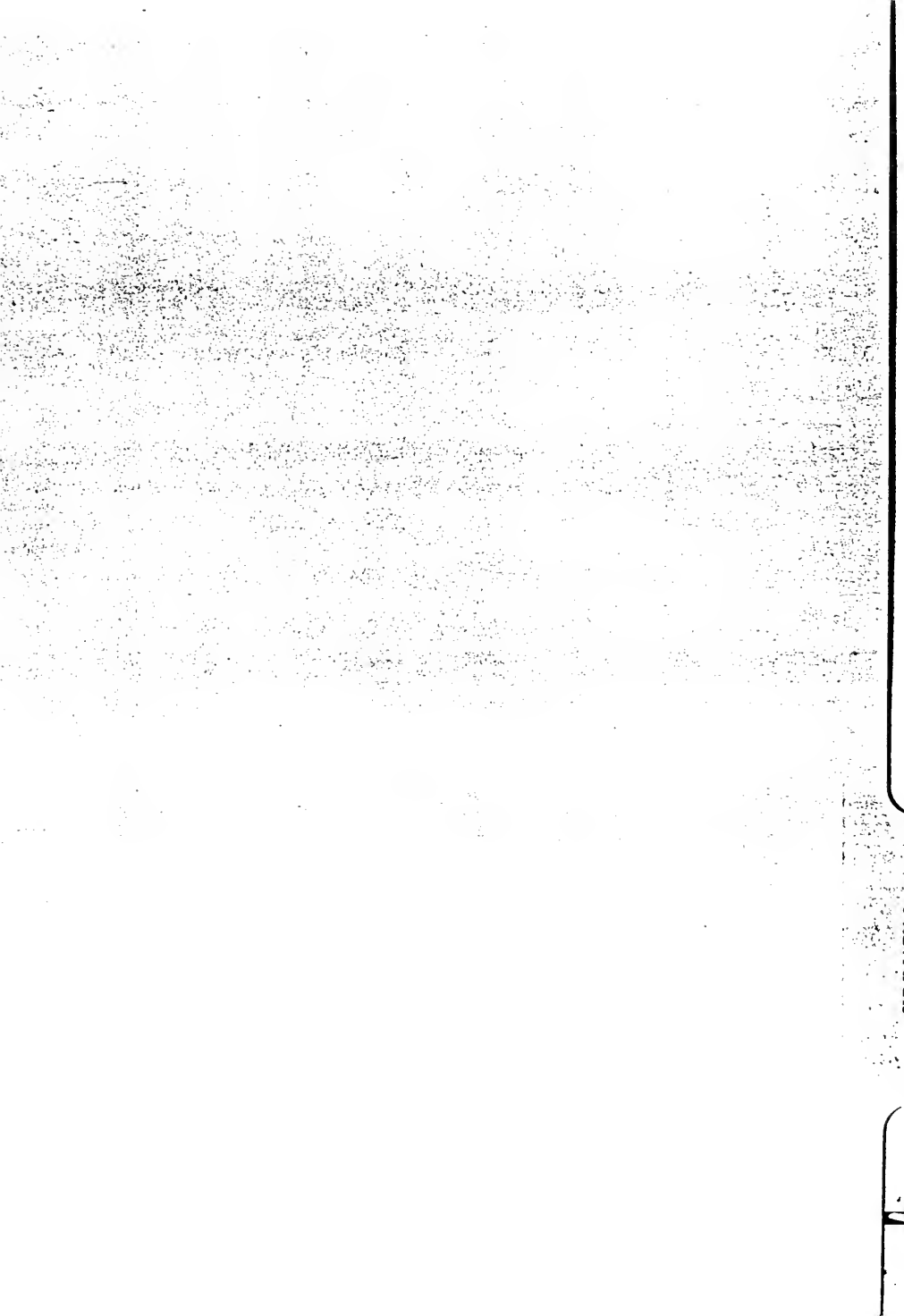
The next topic was the registration process under the various paratransit services in the region. While Pace is currently looking into the possibility of linking their computer with the CTA's, it will take some time for the three service boards to implement and utilize a common certification/registration program. As far as a "universal card" is concerned, that is an RTA, not a Metra, issue.

The idea of the three "interceptor" stations introduced in the last meeting was again raised. While it was agreed that this would be a good idea since it eliminates the need to travel downtown and then out again to non-central City destinations, some committee members feel that it does not go far enough. They feel that all Metra stations should be RCAP origins/destinations, just as they are for the able-bodied, whether the trip is totally within the CTA service area or not. After extensive discussion, it was agreed that in order to preserve suburban trips for those who need them, RCAP should continue to deny service to trips that could be made by CTA because the RCAP budget is much more limited than that of CTA's Special Services program. The committee members wish the Minutes to reflect that they feel they have a right to the same service as the able-bodied, and that they are agreeing for the present that CTA will serve in-City trips only because of the budget restriction. One member disagreed with the majority view, stating that she cannot accept the idea of settling for less than the able-bodied.

Other details of RCAP were discussed. It was decided that the need to make trip reservations and/or changes during weekends (not currently available now) will be addressed by requiring that a dispatcher be available during all hours of service. This will be written into the 1990 contract. With respect to requiring contractors to provide toll-free 800 telephone numbers, it was decided that Metra and Pace would talk to the contractors, but that the high cost might result in fewer trips. It was understood by all present that each item of negotiation has a cost associated with it, and that the final program will reflect some trade-offs.

The next meeting was tentatively scheduled for Friday, December 15, 1989 for 4:30 to 6:30PM. At that time, progress toward implementation of the 1990 RCAP program will be discussed.

LM/rb
11/14/89



Pace Implementation Plan Analysis

Summary: Pace's Implementation Plan is generally consistent with the Regional Plan policies. It supports mainline accessibility and expanded eligibility criteria, and discusses the need to research more cost effective methods of providing special services.

Pace's 1990 funding request is for \$2.5 million for special services, an increase of approximately 400% over 1989 expenditures. This increase is not adequately supported in the Implementation Plan. Pace's proposed budget also includes \$0.4 million for start-up and maintenance of lift-equipped vehicles.

Staff recommends approval of Pace's requested operating funds for start-up and maintenance of lift-equipped vehicles, \$0.4 million, and \$1.5 million of the \$2.5 million request for special services. The remaining \$1 million of the request for special services is recommended for appropriation into a contingency account to be used if the level of funds spent on special services in 1990 exceeds the approved \$1.5 million.

Description of Service: During the period from 1990 - 1994, Pace plans to increase their fleet of accessible buses from the current 20 buses (in Waukegan) to 320 buses. This will result in nearly 50% of their peak fleet requirement being lift-equipped. In 1990, 84 lift-equipped vehicles will be placed in service in the Aurora, Elgin and Joliet systems, representing nearly 100% of these fleets. Between 1991 and 1994, 152 lift-equipped buses will be deployed on Cook County fixed route services and will be placed to connect with accessible CTA services - both bus and rail. This represents about 40% of the buses in fixed route service in Cook County.

Pace's Implementation Plan also calls for a total of 64 accessible 30 foot buses to replace 42% of the peak requirement for private contractor owned equipment for commuter rail feeder service by 1994. The deployment of these buses will be coordinated with accessible commuter rail stations and equipment. Beyond 1994, an additional 26 30 foot lift-equipped buses will be delivered.

In early 1990, special services in Cook County will be expanded to the Southwest area, and the West service area will be expanded at an unidentified time during the year. Plans for special services in Du Page county are not clear in terms of their timetable for implementation or their function.

Pace's Implementation Plan states that after special services are implemented throughout Cook County, they will further explore potential cost-benefits and service delivery improvements that might be realized by consolidating special services and local dial-a-ride services. Plans for a demonstration of potential service delivery savings from consolidation will be further developed in 1990. Expanding services prior to considering consolidation could prejudice an objective review and make any changes more difficult to effect.

Cost Impact: The following Table illustrates the projected expenditures reported in Pace's Implementation Plan.

Pace Implementation Plan Projected Expenditures (In thousands)						
Operating				Capital		
	Fixed Route	Special Services	Operating TOTAL	Annualized Fixed Route	Special Services	Capital TOTAL
	Start-Up	Ongoing				
1989	\$0	\$45	\$600	\$49	-	\$49
1990	\$361	\$45	\$2,500	\$244	-	\$244
1991	\$202	\$237	\$3,000	\$373	-	\$373
1992	\$236	\$353	\$3,500	\$513	-	\$513

Pace's 1990 operating expenses of \$2.9 million represents approximately \$400,000 in expenses for start-up and maintenance of 84 accessible buses in the satellite cities and nearly a 420% increase in estimated special services expenses. Fixed route operating costs will increase in 1991 and 1992 as a result of the addition of lift-equipped buses. The increases in special services in 1991 and 1992 are not discussed in detail in Pace's Implementation Plan.

The amortized capital costs in 1990 of \$244,000 are due to 84 new lift-equipped buses plus 20 vehicles currently in operation in addition to the cost of support equipment. The cost is based on an assumption of \$15,000 per lift at an opportunity cost of 8% over the 12 year life of the lift. In 1991, the annualized capital cost increases to \$373,000 with the delivery of an additional 51 lift-equipped buses, and to \$513,000 in 1992 with delivery of another 75.

There are two measures of cost impact - recovery ratio impact and overall funding level as defined in the Regional Plan policies. The increase of \$2.3 million in operating expenses over 1989 expenses has the result of reducing Pace's 1990 recovery ratio by 0.64 percentage points. The Regional Plan defines funding level as operating expenses, exclusive of start-up costs, plus the annualized capital costs. The Regional Plan policies state that the maximum funding level for services for persons with disabilities at Pace is 5%. The 1990 expenditure of \$3.15 million represents 3.5% of Pace's 1990 budget, which is within the policy guidelines.

Level of Service: In 1990, Pace will have an additional 84 lift-equipped buses in operation for a total of 104. All fixed route service in Waukegan, Elgin, Aurora, and Joliet will be accessible. Ridership projections for the new services cannot be made at this time.

In 1990, Pace plans to expand their multi-township special services in southwest Cook and in west Cook. Further expansion in Du Page is also proposed. In 1989, it is estimated that 35,000 trips will be provided by Pace special services. Pace estimates that they will provide 167,000 trips in 1990, an

increase of 480% over 1989. Part of the increase in trip-making occurs as a result of expanded eligibility criteria (from wheelchair only to include ambulatory disabled). The eligibility expansion is expected to increase demand to 115,000 trips which represent 330% of the increase. This suggests that the increase in trip-making expected in 1990, exclusive of increases due to eligibility expansion, is 150%.

Compliance with Policies: The Pace Implementation Plan is consistent with the mainline accessibility policy of the RTA. Pace endorses expanded eligibility criteria but does not clearly state that they endorse the RTA Board approved criteria. This discrepancy should be addressed more clearly by Pace. In addition, the Pace plan does not address the equivalent service criteria, particularly as it relates to services in Cook and DuPage counties.



IMPLEMENTATION PLAN FOR TRANSPORTATION SERVICE OF THE DISABLED

Submitted to: Regional Transportation Authority

By: Pace

Date: December, 1989

OVERVIEW

The Pace implementation plan describes the approach and actions that will be taken by Pace to implement a comprehensive system of services designed to meet the needs of disabled transit users.

The goal of this effort is to make the Pace system accessible to the disabled. This is accomplished by acquiring lift equipped fixed route vehicles and providing supplemental Mobility Limited Service.

Mobility Limited Services are planned for Cook and DuPage Counties where a fully accessible fixed route fleet will not be achieved during the 5 year period.

The plan as presented is broken down into two major categories - Fixed Route Services and Mobility Limited Services. These categories are then further segmented geographically, reflecting the various travel markets and stages of accessible system development.

FIXED ROUTE

The implementation of accessible fixed route service is based on Pace's vehicle replacement schedule. This schedule is based on prior agreements with UMTA and RTA, and available capital funding.

Lake and McHenry Counties

McHenry County fixed route services are fully accessible, no further implementation actions are planned for McHenry. Lake County services provided by Pace North Division in Waukegan are accessible. Services provided by Highland Park are not accessible. These services will be made accessible with the delivery of accessible equipment in 1992.

Kane and Will Counties

Pace is in the process of acquiring accessible fixed route equipment for Kane (Aurora, Elgin) and Will County services. A total of 84 vehicles will be placed into service in these areas during 1990. Once this is accomplished, all fixed route services in these counties will be accessible with the exception of a few privately contracted routes which provide Metra feeder services.

DuPage County

Fixed route services in DuPage County consist primarily of commuter rail feeder services operated by private contractors. These services will be made accessible with the delivery of replacement equipment (reference below).

Cook County

Over the next five years, Pace will also acquire 152 lift equipped fixed route vehicles which will be placed in service in Cook County. The first 47 accessible vehicles for Cook County will be received in 1991. Pace will deploy these vehicles so as to maximize accessible trip making capabilities based on the connections to accessible CTA rapid transit stations and the deployment of CTA's 700 accessible fixed route vehicles.

Commuter Rail Feeder Services

Pace is proposing to replace the private contractor owned school bus type equipment with accessible 30' transit coaches. These vehicles will be placed into service at the rate of 20 per year beginning in 1992. A total of 64 vehicles will be acquired by 1994. Plans for deployment of these vehicles will be coordinated with Metra's plans to acquire accessible rail equipment and make the necessary station modifications.

FIXED ROUTE COSTS

The following table identifies the number of vehicles placed in service and the associated capital and operating costs by year for the period 1990-1994.

Capital and Operating Expense of Accessible Fixed Route Fleet Deployment (000's)

	<u>Number of Accessible Fixed Route Vehicles</u>			<u>Capital Cost</u>			<u>Operating Cost</u>		
	<u>Added</u>	<u>Total</u>	<u>% of Peak*</u>	<u>Lift Amort.</u>	<u>Support Amort.</u>	<u>Total</u>	<u>Start-Up</u>	<u>Ongoing</u>	<u>Total</u>
Current	-	20	3%	\$ 22	\$ 6	\$ 28	-	\$ 45	\$ 45
1990	84	104	16%	\$126	\$28	\$154	\$361	\$ 45	\$406
1991	51	155	23%	\$195	\$52	\$247	\$202	\$246	\$448
1992	75	230	34%	\$301	\$52	\$353	\$236	\$381	\$617
1993	63	293	44%	\$395	\$55	\$450	\$185	\$598	\$783
1994	27	320	48%	\$438	\$55	\$493	\$ 30	\$793	\$823

Assumptions

- * Assumes 20% spare ratio of accessible equipment.
- 557 bus peak requirement (Includes 153 bus private contractor peak req.)
- Lift costs amortized over 12 years, 1990 cost at \$15,000 increases \$1,000 year annually.
- Capital support vans amortized over 5 years, 1990 cost \$37,000 increases 7% annually.
- Start up costs estimated at \$4,300 per vehicle includes marketing, safety training, parts, inventory, maintenance and user training. (Excludes private contract routes/equip.)
- Ongoing costs estimated at \$2,275 annual per bus in 1990 inflated at 4% annually. (Excludes private contract routes/equip.)

MOBILITY LIMITED SERVICES

In 1990, Mobility Limited Services will be implemented throughout Cook and DuPage Counties. The Mobility Limited Services will provide an accessible alternative to inaccessible fixed route services in these counties. The services will cover a broader area than the local dial-a-ride services which provide only limited geographic coverage and days and hours of service.

Eligibility Criteria

Initially, in 1990, Pace will use the following eligibility criteria for Mobility Limited Services:

People who are unable to climb three standard transit steps due to a physical disability and people who are both deaf and blind will be eligible for Mobility Limited Services.

Pace plans to expand the eligibility criteria during the year to be similar to the criteria recommended by the RTA in its Regional Plan for Services for the Disabled. The Pace eligibility criteria will be expanded after the RTA and the three service boards agree on the functional interpretation for several of the criteria listed in the RTA Plan. More specific definitions will ensure that the criteria can be consistently applied throughout the region. This will also help achieve the long term goal of a "universal registration card" which will eliminate the need for a disabled person to register more than one time in order to be eligible for Mobility Limited Services offered by any of the three services boards.

Administration

Pace will continue to contract out for the operations of all Mobility Limited Services. Pace staff will monitor these provider contracts.

Pace will maintain a passenger certification process. Until the eligibility criteria are expanded, Pace will continue to use the certification procedure described in the attached materials.

Pace will maintain a computer system for the continual updating of its "eligible riders" list which is provided to all of its Mobility Limited Services contractors. The computer system will also continue to be maintained for the tracking of rides provided by each of the Mobility Limited Services contractors.

Cook County

Pace plans to complete the implementation of multi-township Mobility Limited Service projects which began in 1988. Pace has identified five broad service areas in Cook County, designated by geographic location: northeast, northwest, west, southwest and south Cook. Pace has established Mobility Limited Services contracts, and began providing service to disabled individuals in the northeast, northwest and south Cook projects in 1988 and 1989. Services in southwest Cook are scheduled to begin in early 1990. Also in 1990, the west Cook service currently in place will be expanded.

DuPage County

In DuPage County, Mobility Limited Services will be implemented in conjunction with the development of new local dial-a-ride services and multi-township dial-a-ride services. The Mobility Limited Services will cover a broader area than already established Pace-funded local dial-a-ride projects in parts of the County. Current plans are to provide two broad service area projects - north DuPage and south DuPage - which cover the entire county.

Coordination with Local Dial-a-Ride and Fixed Route Services

After Mobility Limited Services are implemented in all of Cook County, Pace will further explore the potential cost-benefit and service delivery improvements that might be realized by consolidating Mobility Limited Services with the local dial-a-ride services. This task will include discussions with townships and villages that currently receive funding from Pace for the operation of local dial-a-ride services. Given the significant differences among the local dial-a-ride services in Cook, the possibilities and benefits of consolidation are not expected to be the same for all areas of the County. However, the possibility exists to consolidate these services reducing costs for both the Mobility Limited Services program and the local dial-a-ride program. Pace will develop a demonstration project in Cook County to test the feasibility of service consolidation. These plans will be further developed in 1990.

Pace will also coordinate mobility limited services with accessible fixed route services in Cook and DuPage counties. Pace has approved grants for the acquisition and construction of strategically located passenger transfer facilities in DuPage county. The need for similar facilities in Cook County is being reviewed.

Cost and Ridership Projections - 1990

In 1990, Pace will continue discussions with a variety of transportation operators, including taxi companies, concerning their participation in Pace's Mobility Limited Services Program. Pace will also perform further analysis of the cost efficiencies of per trip versus per hour payment methods. These activities, in addition to others already identified, will be undertaken with the goal of improving cost efficiency and service improvements.

Due to the uncertainty of ridership demand based on the RTA eligibility criteria, and due to the uncertain potential for developing cost efficiencies based on demand, it is not possible to determine an accurate service budget for 1990 and beyond at this time. The following proposed budget is constrained based on a number of factors which includes the necessary lead time to implement the broadened criteria and associated contract changes. The assumptions used are based on current experience. It is expected that the RTA eligibility criteria will be further defined and that Pace's registration system will be modified to accommodate these criteria in 1990. Due to these conditions, it is not possible to project with any certainty beyond 1990.

Proposed Mobility Limited Services Budget

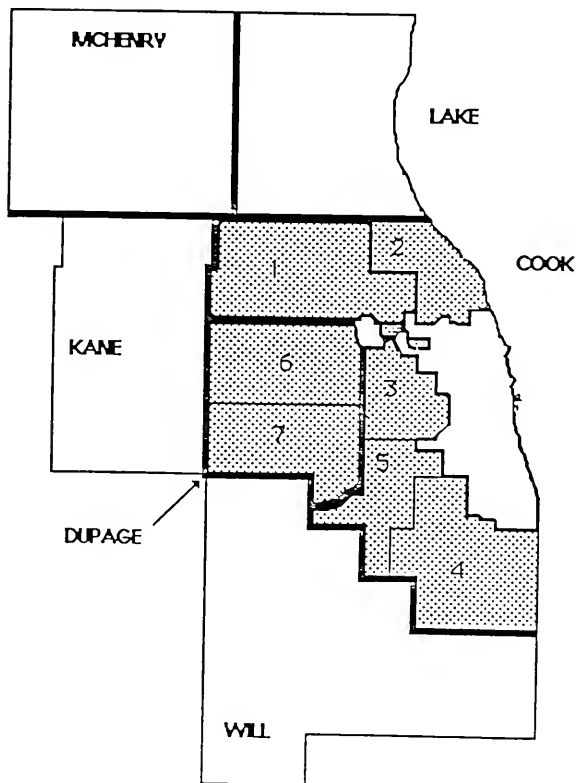
	<u>1990</u>	<u>1991</u>	<u>1992</u>
Total Cost	\$2.5 million	\$3.0 million	\$3.5 million
Revenue:	\$.3 million	\$.4 million	\$.5 million
Net Cost:	\$2.2 million	\$2.6 million	\$3.0 million
Ridership:	167,000	200,000	233,000

Assumptions

- Average cost per trip of \$15.
- Average revenue per trip of \$2.

SERVICE FOR THE MOBILITY LIMITED
PROPOSED GEOGRAPHICAL AREAS OF COVERAGE

1. Northwest Cook
2. Northeast Cook
3. West Cook
4. South Cook
5. Southwest Cook
6. Northern DuPage
7. Southern DuPage



**SPECIAL SERVICE FOR THE MOBILITY LIMITED
PROPOSED GEOGRAPHICAL AREAS OF COVERAGE**

Northeast Cook

Evanston Township
New Trier Township
Niles Township
Northfield Township

Northwest Cook

Elk Grove Township
Maine Township
Palatine Township
Schaumburg Township
Wheeling Township
Barrington Township
Hanover Township

West Cook

Berwyn Township
Cicero Township
Oak Park Township
Proviso Township
River Forest Township
Riverside Township
Leyden Township
Norwood Park
Stickney Township

Southwest Cook

Lemont Township
Palos Township
Lyons Township
Portions of:
Orland Township
Worth Township
Bremen Township

South Cook

Bloom Township
Calumet Township
Rich Township
Thornton Township
Portions of:
Orland Township
Bremen Township
Worth Township

Northern DuPage

Addison Township
Bloomingdale Township
Wayne Township
Portions of:
Winfield Township
Milton Township
York Township

Southern DuPage

Naperville Township
Lisle Township
Downers Grove Township
Portions of:
Winfield Township
Milton Township
York Township

PACE

**Pace
Special
Services**

PHOTO

ID NO. _____

Signature: _____

For information call: (708) 364-PACE

**This card is the property of Pace and may be used
only by:**

Name: _____

Address: _____

Phone: _____

Special Services APPLICATION INSTRUCTIONS

Pace's Special Services are intended to serve persons who are severely mobility-limited. Persons who are unable to climb the steps of a standard bus and persons who are **both** legally blind and deaf are considered severely mobility-limited and thereby eligible for special services.

To qualify, the applicant must:

- 1) Have a physician complete the yellow PHYSICIAN'S CERTIFICATION certifying that the individual is unable to climb the three (3) standard-size steps needed to board a coach or is **both blind and deaf**.
- 2)

TO VERIFY ELIGIBILITY FOR SPECIAL SERVICES, THE PHYSICIAN **MUST** ATTACH A WRITTEN STATEMENT OF THE APPLICANT'S DISABILITY ON PROFESSIONAL STATIONERY OR PRESCRIPTION BLANK IN ADDITION TO FILLING OUT PART "B" OF THE YELLOW PHYSICIAN'S CERTIFICATION FORM.
- 3) Complete the white APPLICATION form, indicating name, address, special needs, etc.
- 4) Complete part A on the yellow PHYSICIAN'S CERTIFICATION form.
- 5) Sign the Special Services Card and fill in your telephone number, social security number, and address.
- 6) Include a 1.5"x 1.5" photograph of the applicant. This photograph must not be glued or in any way permanently affixed to the Special Services Card.
- 7) Mail all three documents with the I.D. Card and photograph to:

Pace
Special Services Certification
550 W. Algonquin Rd
Arlington Heights, IL 60005

If you are eligible, you will receive your Special Services card in the mail along with instructions on how to make reservations for the service. Your name will be entered into a computer, and you will be ready to use the service.

Pace SPECIAL SERVICES APPLICATION
Please Print or Type

Name _____ Application Date _____
First Middle Last Date of Birth _____
Address _____ Apt.# _____ City _____ Zip Code _____
Up. _____ Cnty. _____ Ph.#() _____ Home () _____ S.S.# _____
Home Pick Up Location (if different from above address) _____
What is your disability? _____

Is your disability permanent? ☐ Yes ☐ No
If so, estimate how long you will need to use Pace Special Services. _____

Mobility Aids Used:

☐ Manual wheelchair ☐ 3 wheel vehicle (Lark, Amigo, etc.) ☐ Crutches
☐ Electric wheelchair ☐ Canes for visual impairment ☐ No Mobility Aid
☐ (one (s) for support ☐ Hearing Aid/Device ☐ Other (specify) _____
☐ Walker ☐ Guide animal _____

Can you ride in and get into and out of a car?
☐ Yes ☐ No ☐ Sometimes

Can you board a bus or van, can you sit or transfer from a wheelchair onto the vehicle's
seat?
☐ Yes ☐ No ☐ Sometimes

Check most appropriate box.

☐ I am physically able to sign my name. ☐ I am not physically able to sign my name.
☐ I sign my name with an 'X'. ☐ I can physically sign my name only at times.

In case of emergency, please contact:

(Relation to you) () (area code) () (Phone)

Applicants should review the brochure on Pace Special Services for information about the
program. Please complete this form and return it along with the information requested on
the accompanying blue application instructions.

Signature of Applicant _____

USE ONLY

Appropriate (specify) _____

Eligible _____ Ineligible _____ I.D. _____ Date _____

Eligible, specify reason: _____

Processed _____ Expires: _____ Computer entry _____

Special Services

PHYSICIAN'S CERTIFICATION

Applicant, please complete Part A of this form and have your physician complete and sign Part B.

YOUR PHYSICIAN MUST ALSO SUBMIT A SIGNED STATEMENT ABOUT YOUR DISABILITY ON PROFESSIONAL STATIONERY OR PRESCRIPTION BLANK.

Return this form and the letter from your doctor with your application.

A	Applicant's Name (Please type or print)		Phone
	Street Address, City		Zip Code
<p>I understand that the purpose of this certification form is to determine eligibility for the Special Services program, and I agree to release the information below to Pace for this purpose. I understand that the completed form will remain on file with Pace, but will not be made available to any other person or agency except those necessary to administer the program. I understand that Pace reserves the right and opportunity, at its own expense, to have any person seeking Special Services examined by an outside physician when and so often as it may reasonably require.</p> <p>Check most appropriate box.</p> <p> <input type="checkbox"/> I am physically able to sign my name. <input type="checkbox"/> I am not physically able to sign my name. <input type="checkbox"/> I sign my name with an 'X'. <input type="checkbox"/> I can physically sign my name only at times. </p>			
Signature of Applicant		Signature of Witness (If not able to sign)	Birthdate

<p>Applicants for Pace Special Services must be severely mobility-limited persons who are unable to use regular Pace/CTA vehicles because of physical impairment.</p> <p>This is to certify that the above named-applicant</p> <p><u>Cannot climb three (3) standard motor coach steps (avg. thirteen (13) inches per step).</u> or <u>Meets legal definitions of both blindness and deafness.</u></p> <p>Diagnosis: _____ Expected Duration: _____</p> <p>How long have you known the applicant? _____</p> <p>Signature _____</p> <p>Illinois State License No. _____ Date _____</p> <p>Print or Type Name _____</p> <p>Office Address _____ Phone _____</p> <p>City _____ State _____ Zip _____</p>			
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ATTENTION PHYSICIAN: Diagnosis on professional stationery or prescription blank must be attached to this form.

**REGIONAL PLAN
FOR
TRANSPORTATION OF THE DISABLED**

Plan Development and Policies

Introduction

This is a plan to address the public transportation needs of individuals with transportation disabilities in the Northeastern Illinois Region. A segment of the population has difficulty or is unable to use public transportation as it is currently configured. These are people in wheelchairs (non-ambulatory disabled) and people who can walk but are unable to climb three standard bus steps (ambulatory disabled). In recent years, public transportation in the Region has responded to the problem of providing public transportation services to the disabled by offering demand response door-to-door service. In addition, the Chicago Transit Authority (CTA) and Pace have committed to the purchase of lift equipped buses. The system of public transportation for the disabled has begun to change from the previous long range plans and therefore should undergo a comprehensive review. The definition of terms used in this report is provided in the Glossary.

Need for a Regional Plan:

Several factors indicated that a regionwide plan for the provision of public transportation services for the disabled was needed.

- The Regional Transportation Authority (RTA) recognized that the provision of special services that is called for in the Section 504 plans of CTA and Pace would be extremely costly to meet the rapidly expanding demand, nor would it provide equivalent service since spontaneous trips cannot be accommodated.
- Legal action under the Illinois Human Rights Act has resulted in an agreement to evaluate the performance of lift equipped bus service at the CTA. Through the course of establishing criteria for the performance of the evaluation, the need for an overall regional approach to public transportation of the disabled was evident.
- Despite significant increases in the funding for special services programs throughout the region, there is a high level of dissatisfaction from disabled consumers regarding service quality, registration procedures, and the difficulty in scheduling a ride.

Local experience with public transportation for the disabled has been costly, has not stood up well against legal challenges, and was not adequately addressing the public transportation needs of the disabled. The need to evaluate the provision of service for the disabled in the Region was clear.

Goals of the Regional Plan:

The goal of the Regional Plan was to formulate RTA and Service Board policy to provide the framework to support coordinated delivery of service to the disabled by the respective Service Boards, and to develop implementation plans for the region. The policies and plan must be consistent with Federal and State requirements and strike a balance between financial, operating and service issues as they relate to the provision of transportation for the disabled.

Definition of Transportation Disabled:

There are two major issues related to defining the market for special needs public transportation. The first is how to define who is 'transportation disabled'. The second is to estimate the population of 'transportation disabled' individuals.

The essence of being 'transportation disabled' is the difficulty or inability of an individual to use conventional public transit vehicles or stations. This suggests the use of a definition that describes a 'functional' condition, rather than a medical condition (e.g. the medical condition, arthritis, does not necessarily make an individual unable to use conventional transit. Rather, the location and severity of the arthritis may be such that an individual is unable to climb three standard bus steps - the functional limitation). The Regional Plan focuses on public transportation services for individuals who have great difficulty or cannot use public transportation.

RTA estimates that there are 120,000 transportation disabled people in the six county Region. There is an equal split between the suburbs and the city. An estimated 15,000 - 20,000 of the transportation disabled are wheelchair users. An estimated 25 - 35% of the transportation disabled population is a potential user of public transportation services. This is slightly higher than the potential transit user market in the non-disabled population.

Appendix A provides further detail on the development of the population estimates of transportation disabled in the Region.

Background and Current Services

History:

Numerous efforts have been made to try to understand how to provide transportation to the disabled in the state and in the Region. A brief summary of the various efforts follows.

- 1979: Township paratransit services initiated by the RTA.
 - RTA provided/funded vehicles for municipalities.
- 1984: Governor's Task Force - focused on state level issues
 - Promoted special services and accessibility
 - CTA received \$3 million for an expanded special services program.
 - Metra received \$500,000 to study and design an accessible rail car.
 - Pace received \$1 million for a lift demonstration in Waukegan.
- 1985: Madigan's Task Force - focused on the six county Region
 - Promoted coordination and cost effectiveness of services in the six county Region.
- 1987: - Metra Rail Corridor Accessibility Program (RCAP) service started
 - Demonstration to provide CBD oriented service to individuals in wheelchairs.
 - Pace special services started.

- 1988: 120 Day Process - Focused on CTA
 - Developed evaluation criteria for lift equipped vehicles
 - Highlighted the need for a Regional Plan
- 1988: Mobility Limited Symposium - sponsored by the RTA to focus on service in the six county Region.
 - Increased awareness of transportation needs of the disabled.
 - Highlighted alternative methods of service used throughout the country.
- 1988-9: Regional Plan for Transportation of the Disabled was initiated.

Legal Requirements:

There are both Federal and State requirements that affect decisions on how to provide public transportation service to the transportation disabled.

Federal: At the Federal level, there are regulations implementing Section 504 of the Rehabilitation Act. A summary of the Federal regulations that apply to the public transportation providers in the Region follows.

- Bus System Requirements:
 - Accessible mainline, special service or mix; subject to full performance accessibility service criteria.
 - Cost cap at 3% of annual operating budget.
- Rail System Requirements:
 - Rapid rail - new cars must be accessible.
 - Commuter rail - currently not covered under Section 504.
- Fixed Facility Requirements:
 - All new or altered facilities must be designed, constructed and operated in accordance with Uniform Federal Accessibility Standards.

CTA and Pace have Section 504 plans that have been approved by UMTA. The CTA plan provides for special services to meet demand and the service equivalency criteria by 1993. The Pace plan provides for accessible fixed route service in the satellite cities (Waukegan, Elgin, Aurora and Joliet), and for special services in Cook and Du Page Counties. The Pace plan also includes local dial-a-ride services which provide transportation to the disabled and other segments of the population. Both CTA and Pace are currently in compliance with the regulations implementing Section 504. Recently the 3rd Circuit Court of Appeals in Philadelphia has upheld a lower court ruling that the basis for the 3% cost cap on expenditures is 'arbitrary and capricious'. However, the concept of a safe harbor provision was not struck down. Further resolution of this issue is pending.

State: At the State level, the relevant legal requirements are defined by the Illinois Human Rights Act. Unlike federal requirements, there are no detailed regulations implementing this law. The Illinois Human Rights Act prohibits

discrimination in all public accommodations, including transit. The recent legal challenges in the Region have occurred under this law.

The primary relevant legal action that is instructive in the requirements of the Illinois Human Rights Act as applied to public transportation is the case of Jones vs. CTA and RTA. This case was filed before the Human Rights Commission in 1985 claiming discrimination under the Human Rights Act in the failure of CTA to have an accessible bus system. The Administrative Law Judge found that 1) the CTA and RTA have a duty to provide a reasonable accommodation to avoid discrimination, 2) CTA special services was inadequate because of its poor quality and insufficient level, 3) the plaintiffs were not entitled to relief "at any price", and 4) that at a minimum, CTA should attempt a good faith pilot project using lifts.

A settlement agreement was developed that provides that 1) the CTA will purchase and deploy 700 lift equipped buses, 2) that after 5 years the success of lift equipped service will be evaluated on basis of cost per ride compared with the cost per ride of special services, 3) if the evaluation is successful, CTA will make a minimum of 50% of its fleet accessible; if not, there would be no further obligation beyond the useful life of the 700 buses, and 4) that during the evaluation period there would be a stay of Human Rights Act litigation on the issue of CTA lifts.

The RTA and Metra have been recently joined in a complaint with the State Human Rights Commission regarding the accessibility of Metra vehicles and stations. This complaint involves similar issues to the Jones vs. CTA and RTA case.

Pending Federal Legislation: There is major legislation pending at the Federal level that may affect the requirements for public transportation provisions for the transportation disabled. This legislation is the Americans with Disabilities Act currently being considered by Congress. The legislation is being described as civil rights legislation for disabled individuals. At this time, the Senate has passed a version of the Americans with Disabilities Act. The House is currently considering the legislation. There is strong support for the Americans with Disabilities Act both within Congress and the Administration. As currently structured, the portion of the legislation that addresses public transportation calls for all new vehicles and all remanufactured vehicles to be equipped with wheelchair lifts. It also calls for a 'comparable' special services system to be provided consistent with regulations to be put forth by the Secretary of Transportation. Additionally, all key stations must be made accessible within three years although there is a provision to extend that time frame to 20 years under certain circumstances. This legislation goes further than the Regional Plan in terms of the level of services that are provided.

Current Services:

The System Today: The RTA and the three Service Boards now provide public transportation to the disabled. The CTA currently provides special services to severely mobility limited individuals. Metra funds the Rail Corridor Accessibility Program that provides special services parallel to their rail lines for wheelchair users. Pace has special services in most of Cook County for wheelchair users.

accessible fixed route buses in Waukegan, and subsidizes numerous local dial-a-ride projects in cooperation with local townships that provide mobility to the disabled as well as other segments of the population. Historically, services to the disabled have been structured primarily as special services instead of providing mainline accessibility.

The programs that provide service exclusively to the disabled throughout the Region provided approximately 820,000 trips in 1988. The Pace local dial-a-ride service provided an additional 1.2 million trips in 1988 of which approximately 10-15% are estimated to serve the severely mobility limited. The programs that provide service exclusively for the disabled at all the Service Boards have budgeted expenditures of approximately \$15 million in 1989 which is 1.5% of the combined annual operating budgets.

Current Commitments: In addition to current special services, Pace and the CTA have made commitments to operate some accessible fixed route buses. CTA will evaluate the performance of 700 accessible buses over the next 5-7 years. Pace has ordered lift equipped buses for the transit systems in Aurora, Elgin and Joliet. They have also committed that the next order of 47 buses for Cook County service will be lift equipped. Additionally, many CTA and Metra station facilities have been made accessible as they are built, renovated, or improved.

The Regional Plan Process

The RTA, in cooperation with its Service Boards - the CTA, Metra and Pace, has developed a Regional Plan for Transportation of the Disabled in order to address the regional public transportation needs of the disabled in the Region. Developing such a plan required broad Service Board participation at both the staff and Board levels as well as the active participation of representatives of the disabled community. The Regional Plan project objectives were:

- Define RTA and Service Board goals for the Regional Plan project.
- Determine the legal responsibility of the Service Boards to provide service to the disabled.
- Assess the types of physical transportation needs of the disabled.
- Develop a consistent set of eligibility requirements for the Region.
- Identify alternative strategies for the provision of transportation service to the disabled and establish service criteria to serve as a framework to evaluate proposed service delivery.
- Develop Implementation Plans (performed by the Service Boards) for recommended service.
- Evaluate the Implementation Plans to assure that they meet service criteria including, coordination among modes and among Service Boards, eligibility, and resources.
- Establish guidelines for evaluating future service and assessing resource allocation.

The project staffing consisted of a Management Team and a Policy Committee and an advisory group of disabled representatives of the Mobility Limited Advisory Committee of CATS.

The Management Team was composed of several staff representatives from each Service Board and the RTA. The Management Team was responsible for the research, analysis and report development and reported to the Policy Committee.

The Policy Committee included Board representation from each Service Board and the RTA. The Policy Committee was responsible for reviewing the work of the Management Team, and providing policy direction and guidance to the Management Team.

The advisory group of disabled representatives provided input and reviewed all of the products and policies from the Management Team and the Policy Committee. The consideration given to these issues and the input provided by the advisory group was of great value in developing policies to guide the shaping of the system of public transportation to accommodate individuals with transportation disabilities.

The Regional Plan was developed over the course of one year. During this time, many meetings were held within and among the three major groups working on the project. Throughout the course of the project, consensus was reached on the major issues.

The full scope of the Regional Plan project is included in Appendix B.

Policies

The Regional Plan project has produced a set of policies to be used as guidelines in the development of Implementation Plans by each of the Service Boards. The policies have been formulated to support the goal of the Regional Plan which is to be consistent with Federal and State requirements and to strike a balance between financial, operating and service issues as they relate to the provision of transportation for the disabled.

The policies that follow have been formed by the local experience, discussion with the disabled community, participation of the Service Boards, and the experience of other systems throughout the United States and other countries. The policies are also developed in the context of a look at the future direction in which national disability policies appear to be heading. Of the most significance, and in contrast to the policy that has been followed in the Region in the past, is the policy stating that the primary service delivery for the disabled will be the provision of accessible mainline service. This service will be supplemented by special service, with service characteristics and service levels structured by policy.

From the perspective of the consumer, the recommended policies provide for accessible fixed route service and for currently accessible general public paratransit services where available. The policies also recognize that there are transportation disabled individuals who, because of personal inability or physical barriers, will be unable to use accessible fixed route service. It is

recommended that a supplemental special service system be provided to accommodate these individuals. Criteria and certification recommendations are put forward to assure that constrained resources for special services are used by those who require them.

From the perspective of the public transportation providers, the Regional Plan articulates a comprehensive direction for service for the transportation disabled. The policies are based on the concept of equivalent public transportation service for the transportation disabled and the non-disabled. The establishment of a long term direction that is consistent with operating issues, Federal and State regulations, and fiscal realities will aid in the provision of service for the transportation disabled that is directed and can be relied upon by the transportation disabled.

Discussion and the policies established by the Regional Plan process follow.

Regional Coordination

Discussion: The existing system of transportation for the disabled evolved over time, and in the last several years has grown considerably. This growth has highlighted some of the problems and inconsistencies between types of service offered. The stated project goal is to formulate RTA and Service Board policy to provide the framework to support coordinated delivery of service to the disabled by the Service Boards and to develop implementation plans for the service.

Policy:

- Public transportation for the disabled in the six county Region will be provided within the current Service Board structure.
- Each Service Board must coordinate its public transportation services for the disabled with other public transportation services provided by that Service Board, and with public transportation services provided by other Service Boards at those points where the services connect.
- Regional information on services for the disabled will be provided by the RTA Travel Information Center (TIC) as is information concerning all services in the Region.

Long Range and Implementation Plans

Discussion: A comprehensive long range plan must be developed by each Service Board. The long range plan should be a conceptual view of the ultimate system of public transportation to serve the needs of the disabled population. It should include goals, policies, a narrative description of how the system will look, and a time horizon for implementing the described system. The long range plan is viewed as a short (2-3 page) document that is primarily narrative.

RTA policy calls for a business or implementation plan whenever new or expanded services are proposed. Business or implementation plans must be developed in the context of a comprehensive long range plan. The objective of the business plan is to translate the comprehensive plans and policies into a

detailed road map that insures proposed projects are consistent with the long range plans. Business plans should contain among other elements, a description of the target market, service levels, costs and benefits, and timing of project implementation. Business plans must always cover the first five year period of the long range plan, with the first year of the business plan being the annual budget element.

This approach leads to the establishment of a long term direction and the definition of the steps needed over time to reach the desired end point. The comprehensive long range plan and the implementation plans for transportation of the disabled are essential so that the disabled can make locational decisions with some confidence as to the type and availability of accessible services for their use.

Policy:

- Each Service Board must develop a comprehensive long range plan for providing service to the disabled which specifies the long term goals and policies, provides a narrative description of the desired system of transportation for the disabled, and gives an estimate of the time horizon to reach that system.
- A business, or implementation plan, must be developed by each Service Board outlining the services to be provided to the disabled, the level of revenues and costs of these services, and a timetable for their implementation. This initial plan shall cover the first five year period of the long range plan and coincides with the RTA five year program. The first year of the implementation plan is the annual budget element.

Type of System - Accessibility

Discussion: One of the stated goals of the project addressed the need for the Regional Plan to be formulated to be consistent with Federal and state requirements and to strike a balance between financial, operating and service issues related to the provision of transportation for the disabled.

The current legal requirements suggest that the most prudent course of action is to provide a fully accessible mainline system where the definition of full accessibility depends on the characteristics of the system (size, headways, etc.). The Section 504 regulations discuss a "full performance" concept. Full performance level for accessible buses is defined as service that is provided at reasonable intervals that make practicable the ready use of the service.

Research into the transportation needs of the disabled indicates that there may be a portion of the disabled population whose transportation needs would not be served by accessible fixed route vehicles, primarily because of the inability - either personal or because of physical barriers - to access the vehicles. These persons can be served by transportation specifically designed for the disabled, called special services, which is most commonly door-to-door service provided with accessible vehicles. Federal regulations have allowed transit systems the option of offering accessible fixed route service or special services or both,

although special services are not truly considered public transit since usage is restricted to the disabled.

Since the transportation function of Metra is strictly the provision of line haul service, the equipping of cab cars with lifts and station accessibility would satisfy the responsibility of Metra at full performance accessibility.

The conclusion from this project is that a system of accessible fixed route service and supplemental provision of special services, structured in accordance with regional policies, would strike the most effective balance between the financial, service and legal issues.

Policy:

- Each Service Board must provide a full performance accessible mainline service as the foundation of an accessible regional system. Supplemental special services are offered in recognition that mainline systems may not meet the needs of all the disabled. The quantity of special services provided must be determined by policy that recognizes the unique characteristics of each Service Board, including their role in the regional system. The line haul service characteristics of Metra would not require the provision of special services once full performance accessibility of vehicles and stations is reached.
- The accessibility of new vehicles purchased by the Service Boards must be according to a schedule which meets the goal of providing full performance level accessibility.

Service Equivalence

Discussion: The concept of service equivalence, discussed throughout the development of the Regional Plan, suggests that service to the disabled should be equivalent to service for the non-disabled. The concept of service equivalence was the basis for the criteria used as part of the Section 504 regulations, mandating comparable hours, service areas and fares.

A system of accessible mainline vehicles provides a service which is inherently equivalent for all users. As mainline services are expanded in the suburbs, more and more people, both disabled and non-disabled, will be served by transit. In both the city and the suburbs, there are people who do not use or plan to use public transportation services. It is reasonable to assume that individuals expecting to use or rely on transit will factor the proximity of transit service, as well as other factors, into a decision on where to locate.

In a system that provides both mainline accessibility and supplemental special services, the equivalence criterion dictates that if special services are provided they should only be provided in areas that are already served by transit. This would insure that transit provides services to both the disabled and the non-disabled.

Policy:

- Supplemental special services, fully subsidized by transit agencies, should only be offered to the disabled in areas that are served by fixed route transit.

Eligibility

Discussion: Uniform eligibility for services throughout the Region provides fair and equal access to public transportation services. Currently, Metra and Pace special services only serve people in wheelchairs while CTA serves a broader group of the disabled. An important goal of this project was to develop regional eligibility criteria. A policy should describe the 'target group' of disabled individuals who are to be accommodated by services for the disabled. It has been recommended that the Region strive to serve the severely mobility limited. The severely mobility limited (SML) are defined as those who cannot use transit or can only use transit with great difficulty. The regional population of severely mobility limited is estimated to be 119,000, or 1.6% of the total population.

The eligibility criteria for special services should be designed to complement the accessible mainline system.

Policy:

- The group of disabled individuals that should be certified as being eligible for special services are the **severely mobility limited**. The severely mobility limited are defined as those who have great difficulty or cannot use public transportation at all. The criteria used will be:
 - those who have great difficulty or cannot climb three standard transit steps (when vehicles are not equipped with wheelchair lifts)
 - those who have great difficulty or cannot board a vehicle equipped with a wheelchair lift (when full performance accessibility is reached)
 - those with a mental functional limitation that prevents a person from independently using, or learning to use, fixed route public transit service.
 - the legally blind that are unable to successfully complete a mobility training course.
 - legally blind and deaf (uncorrectable)

Certification

Discussion: The purpose of a certification policy is to assure that the resources available for special services provide the greatest benefit to those who need the services. A program of certification should be fair, not incur undue burden on the applicant, and should achieve the goals established by the eligibility criteria.

There are a number of ways in which certification can be performed. Currently most services in the Region require a doctor's certification of disability. Other properties in the country, notably Pittsburgh, have a system of third party certification in which a physical therapist is contracted by the transit authority to certify whether or not an individual is capable of negotiating a set of bus stairs. The advantage of using a third party for certification is to ensure an unbiased

evaluation. As with any program requiring certification, it is important to have an accompanying program of monitoring to assure the quality of the certification procedures. The need for tighter certification becomes more important in the future when there is an alternative accessible mainline service available and the special services are intended only for those who cannot use the mainline system. Until a regional program of certification is developed, the Service Boards should handle certification according to existing practices.

Another important objective relating to certification is the desire to have one certification accepted throughout the Region, eliminating the need to become certified for each type of service separately.

Policy:

- The Service Boards and the RTA will develop a regional program of certification and recertification for use of special services that is convenient to disabled throughout the service area.

Leveraging Resources for Special Services

Discussion: Experience in the Region and other places in the country has shown that the demand for special services will continue to increase to the level of service that is provided. Continued demand, combined with the lack of economies of scale in the provision of service require that special service expenses must be limited. Therefore it is important to find ways to provide additional special services for a fixed expense — reduce the unit cost, shift demand to other modes, and share the cost with other agencies or units of government.

Reductions in the unit cost of providing service can occur in two ways. The first is through increased competition among the providers of special services. Currently, special service operations are contracted out to private providers to take advantage of competitive market forces. In a competitive market there is greater competition for contracts, a greater supply of providers, and consequently more cost effective service delivery.

Another strategy for reducing the cost of special services is through the introduction of additional types of special services in order to better match the public transportation needs of the disabled with service characteristics.

There are strategies that can be employed to encourage the shifting of demand from special services to mainline services. Policies such as free attendant policies or other innovative methods of shifting demand should be encouraged to free up capacity on special services for those who are unable to use any alternative services. Once full performance accessibility is reached, additional methods such as advance reservation requirement, priority trip allocation, and pricing could be used to develop the most cost effective provision of special services.

It is also important to actively encourage participation by other units of government, social service agencies or private groups to become involved in the funding and/or provision of transportation to the disabled. This will provide a greater level of service for the same expenditure of transit resources.

Policy:

- The Service Boards and the RTA should encourage entry into and participation in the market for special service by a variety of providers to ensure that sufficient providers are available for increased competition in the marketplace.
- The Service Boards should work in cooperation with providers of service to develop innovative methods of cost-effective service delivery.
- When there is more than one service offered to the disabled, methods should be used to encourage passengers to use the lowest marginal subsidy service that they are able to use.
- The regional plan reaffirms the commitment of providing financial support for paratransit services that are offered by the Service Boards and are funded in conjunction with local governments, social service agencies, or private sector organizations.

Promoting Accessibility

Discussion: Accessibility can be promoted both within the current structure of transit service, as well as external to the RTA system.

Within the current structure of transit service, accessibility should be promoted through information sharing as well as through physical modifications and policies designed to enhance accessibility. Important aspects of information sharing include regular and effective communications between the disabled community and the RTA and Service Boards, and effective community outreach for transit mobility training particularly as lift equipment is introduced. The general level of accessibility of transit could be enhanced by making other modifications to the system besides the provision of lifts. These modifications would improve the quality of service and possibly increase the level of ridership. In effect, this would enhance the general level of accessibility of transit and maintain or improve quality of service¹. Additionally, policies for lift usage should be provided at the users option when it is safe to do so. At a minimum lift usage should be available for all disabled users.

¹ *Modifications for Buses:* public address systems which would allow drivers to make announcements, high visibility destination signs with larger characters on front, side, and rear of buses, improved hand rails, and radios which would enhance transferring. *Modifications for Accessible Rapid Transit Cars:* passenger intercoms to facilitate communication with the operator at the wheelchair tie-down position and a tie-down position on each rail car as opposed to the current one position per married two car set. *Existing Rail Station Modifications:* improved signage at all rail stations, tactile edges for the blind, improved access at semi-accessible rapid transit stations which would include a rotogate large enough to accommodate wheelchairs where the station is otherwise accessible, and lighting improvements. *Service Modifications:* a policy of promotion of priority seating for bus and rail, consistent and accurate public announcements, greater reliability of elevators/escalators, promotion of proper signage on vehicles, free attendant policy, and coordinated regional public information.

There are a number of aspects of accessibility to transportation that are not in the direct control of the RTA and the Service Boards. For example, the accessibility of bus stops is largely dependent on the accessibility of nearby curbs and streets. To the extent that these barriers prohibit an individual from using an accessible mainline vehicle, transit's investment in lifts is underutilized, and the resources for supplemental services are not put to their best use. Therefore, it is important for transit agencies to encourage accessibility in other elements of the transportation system not directly controlled by public mass transportation agencies. These efforts reinforce the role of the RTA and Service Boards which is to provide public mass transportation to the six county Region in a cost effective way. It is also important that other transportation options are available to enhance the mobility of the disabled. As transportation providers in the Region, the RTA and the Service Boards should encourage the development of other transportation options for the disabled. Primary among these is the availability of privately operated accessible taxicabs.

Policy:

- The RTA and the Service Boards should establish and maintain means of regular communications with the disabled community.
- The Service Boards should establish programs for transit mobility training of the disabled.
- Modifications to equipment, facilities and operating procedures that would enhance accessibility should be used when feasible.
- Lift use policies should encourage the use of the lift as a passenger convenience and should, at a minimum, be available for use by any disabled passenger upon request provided that the requestor's safety can be assured.
- RTA and the Service Boards should promote public awareness of the need for accessibility of all public facilities necessary to make transit accessible to the disabled.
- RTA should encourage the establishment of privately operated, accessible taxicab services.

Funding Level

Discussion: The foundation of the regional plan is a full performance accessible mainline system. Special services for those that cannot use accessible mainline will be provided as supplemental service. The level of special service to be provided by the Service Boards must be a policy decision, that will consider financial and service impacts.

Since the foundation of the regional plan is full performance accessibility, as a minimum the funding level should cover these costs. The proportion of accessible vehicles to reach full performance accessibility will vary with each Service Board.

The annualized costs of full performance accessibility at CTA will range between \$3.7 million and \$7.2 million. This represents the range of costs for a level of accessibility of between 50% and 100%. At Pace the costs would range between \$1.5 million and \$2.4 million. Metra has defined full accessibility as one accessible car per train. The estimated annualized costs to make approximately 165 cab cars accessible is estimated at \$2.0 million, if only the cost of accessibility features are included, and \$11.0 million if both the costs of accessibility features and the costs of replacement of seats lost due to accessibility features are included.

The constrained financial resources of the Region do not allow for an unlimited investment in services to the disabled. As a result a maximum cap must be established. Such a cap provides an upper limit for the Service Boards in developing implementation plans, while the lower limit is defined as the cost of full performance accessibility. These boundaries establish the range for the annual level of resources to be considered in the development of implementation plans.

The current cost cap suggested by federal regulations, Section 504, is 3% of operating expenses for systems providing transportation for the disabled with special services. Most systems around the country who are committed to an accessible mainline system are spending less than 2% for special services and less than 3% in total.

The existence of rail, bus and mixed mode transit operations in the Region and the disparity in population densities make it difficult to establish a uniform budget percent among the Service Boards. Rail operation expenses are higher than bus operations because they have to maintain tracks and right-of-ways, while buses operate over publicly maintained streets. The additional expense of rail inflates the operating budgets at CTA and Metra in comparison with Pace. Additionally, the low density of the route structure at Pace, due to the lower population density, limits Pace's budget relative to the population it serves.

A maximum total cost, including capital and operating, of 3% of budget or \$20.1 million (based on the 1989 budget) would provide sufficient funds to meet full accessibility cost needs and provide a minimum of \$12.7 million for special services at CTA. At Pace it is necessary to provide 5% of budget or \$3.7 million to meet both the accessibility and special service needs. At the 5% expense level and 100% accessible system, Pace would double their current level of spending on special services to \$1.3 million. Since the transportation function of Metra is the provision of line haul service, it is not recommended that Metra provide special services once they reach full performance accessibility.

The maximum impact on the regional recovery ratio of this level of spending on transportation for the disabled is less than one half of a percentage point.

Policy:

- The minimum level of funding by each Service Board is the cost of providing full performance accessibility. The maximum level of funding,

for all modes of transportation for the disabled, will be 3% for CTA and Metra and 5% for Pace.

Implications of the Regional Plan

As with any comprehensive set of policies, there will be implications for the entire spectrum of stakeholders in the transportation of the disabled. The implications of the Regional Plan on the transportation disabled, the financial implications for the public transportation providers, the legal implications of the policies, and the operational implications must be understood.

Service to the Transportation Disabled

- A new era of mobility for the disabled community is initiated; an era of cooperation in planning and implementing services.
- Transportation needs of both the disabled who can access transit stops as well as those who cannot are met with services that are equivalent to those offered the non-disabled (to the extent that different modes can be equivalent).
- The disabled will be able to make decisions as to where to live and work because they will know the types of services that will be available to them.

Financial

- Total costs of services for the disabled are controllable by actions of policy boards, just as they are for services for the non-disabled.
- Accessible services that are provided with the joint financial participation of other units of governments should be encouraged.

Legal

- Current legal requirements are satisfied in the Regional Plan, and the Plan retains the flexibility to meet prospective requirements.

Operational

- Services are coordinated and are administered consistently regionwide.
- No new, significant operating requirements are placed on the Service Boards.
- The Plan encourages the development of innovative ways to serve the special services market in an effort to reduce the unit cost of service provision, allowing more service for the same budget.

Summary

Through the process of developing the Regional Plan policies, two major things were accomplished. Primarily, a comprehensive regionwide approach to the

provision of public transportation services for the disabled was developed within the existing structure of the three Service Boards. The other significant accomplishment was the development of a strong working relationship between the project team and a diverse group of representatives of the disabled community. The Regional Plan policies reflect a comprehensive approach to the provision of services for the disabled that have been in part developed and endorsed by representatives of the disabled community.

The policies recommend a system of public transportation for the disabled that consists of special services and accessible vehicles. Of the most significance, and in contrast to the policy that has been followed in the Region in the past, is the policy stating that the primary service delivery for the disabled will be the provision of accessible mainline service. This service will be supplemented by special service, with service characteristics and service levels structured by policy. The policies consider special services as a supplemental, yet essential component of the public transportation system for the disabled.

The comprehensive nature of these policies should position the Region along a reasonable, fair, and cost effective path to meeting the public transportation needs of the disabled.

Glossary

Accessible Vehicle - a vehicle that can be boarded by an individual in a wheelchair.

Business Plan - A plan, covering a five year period, that outlines the specific services and service characteristics to be provided. In the case of transportation for the disabled, the service characteristics include, level of funding, implementation schedule, service description, service levels.

Cab Car - a passenger car containing train controls. One cab car is attached to the end of the train opposite the locomotive. Used for push-pull service.

Disabled - Any person who, by reason of illness, injury, age, congenital malfunction, or other permanent or temporary incapacity or disability, is unable without special facilities or special planning or design to utilize mass transportation facilities or vehicles as effectively as persons who are not so affected.

Fixed Route Service - Scheduled service operating on pre-determined fixed routing.

Full Performance Accessibility - The level of accessible vehicles/facilities that are needed to provide service at reasonable intervals that make practicable the ready use of the lift equipped service.

Implementation Plan - see Business Plan

Long Range Plan - A plan documenting policies, service strategies, finances, and other relevant actions over a long time period such as 10-20 years. Provides a clear sense of the long term direction in which an organization is heading.

Mainline Service - The transit service which is provided for the general public. Services include train, fixed route bus, and general public paratransit services.

Paratransit - Demand response service available to a broader population than the disabled.

Safe Harbor Provision - A limitation on required expenditures imposed by U.S. DOT to comply with Section 504 of the Rehabilitation Act under the 1986 regulation. The safe harbor provision was 3% of 3 year average annual operating budget.

Severely Mobility Limited - Individuals with functional disabilities that make it very difficult or impossible for them to use fixed route services.

Special Services - Transit services that are provided to particular target user groups. In this Region, these services are for severely mobility limited disabled individuals who cannot use accessible mainline services.

APPENDIX A

Development of a Regional Plan for Transportation of the Disabled

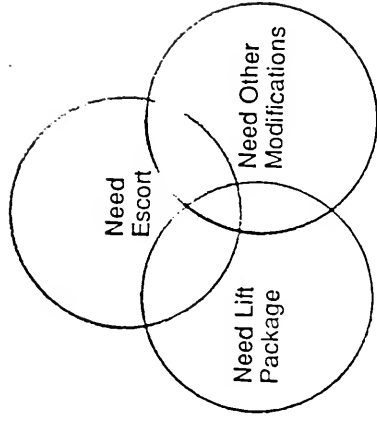
Estimated Population of Transportation Disabled in the Chicago Region

Overview

- *Conceptual Framework*
- *Population Definitions*
- *Population Estimate of Total Transportation Disabled*
- *Population Estimate of Severely Mobility Limited (SML)*
- *Development of Population Estimates by Functional Disability*
 - *Need Lift Package*
 - *Need Other Modifications*
 - *Need Escort*
- *Estimated Population of Wheelchair Users*
- *Estimate of Potential Market for Public Transportation Services*
- *Summary Conclusions*

Conceptual Framework

- In addressing the issue of transportation for the disabled, it is helpful to view it in terms of *functional* disability rather than medical disability.

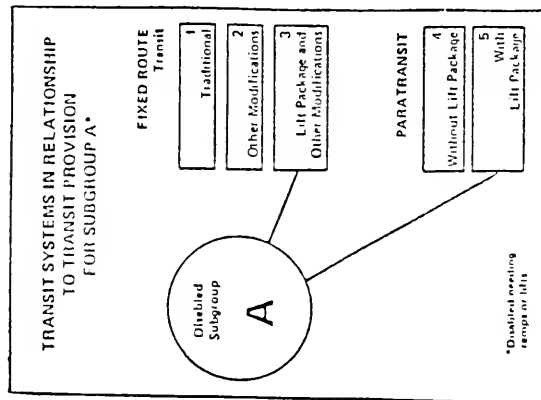


- **Need Lift Package** — People who are not able to use stairs and therefore require ramps or level changing devices (lifts). The majority of this group is *not* restricted to a wheelchair.
- **Need Other Modifications** — People who require modifications, other than or in addition to a lift device, to the vehicle, bus stop, etc. to enable them to use public transportation. This would include people who have trouble getting to or waiting at a bus stop, riding standing, moving in the bus, reading signs or other similar types of problems using transit.
- **Need Escort** — People who need escort to assist them in using public transportation. Includes some blind, developmentally disabled, and physically frail.

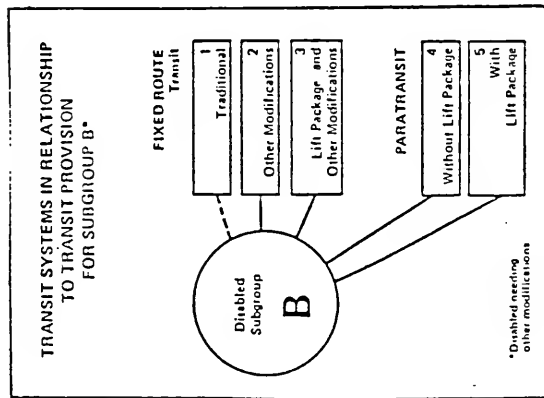
Conceptual Framework (cont'd)

- Each of the groups can be served in different ways, depicted below.

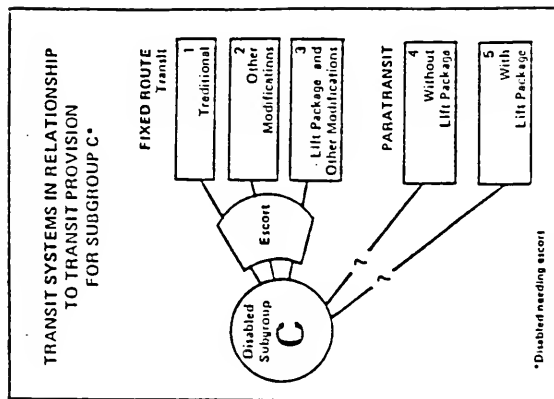
Need Lift Package



Need Other Modifications



Need Escort



Population Definitions

The population of transportation disabled in the six county region varies with the definition of transportation disabled.

- Three *currently used* definitions of 'disabled' in use in this region.

- Broadest definition is equivalent to the criteria of the disabled RTA Special Users Card. For this card, transportation disability is currently defined as the inability to perform one or more of the following activities without significant difficulty; walk more than one block, use stairs or an escalator, board or alight from a standard bus or train, sit down or get up, read informational signs, hear public address announcements. This definition is used by many of the local dial-a-ride services partially funded by Pace.

- Second definition in use is the CTA criteria which define transportation disabled as those who cannot climb three standard motor coach steps or are legally deaf and blind.

- Third definition of transportation disabled is wheelchair users only. This definition is used by the Pace special services for the mobility limited and the Metra Rail Corridor Accessibility Program (RCAP).

- For the *development of the regional plan*, the population of two of these groups are estimated using existing data sources.

- The Census definition of transportation disabled - defined as 'physical, mental, or other health condition which has lasted for 6 or more months and which limits or prevents this person from using public transportation.' - is roughly equivalent to the disabled RTA Special Users Card criteria.

- Severely Mobility Limited definition - defined as individuals for whom using existing public transportation is impossible or only possible with great difficulty - is roughly equivalent to the current CTA criteria.

- The number of people in the categories 'need lift package' and 'need escort' categories will remain basically the same between the Census definition of transportation disabled and the severely mobility limited definitions. The only difference is caused by a difference in the severity of difficulty accommodated by the two definitions. The population of the category 'need other modifications' is reduced significantly due to the change in definition.

Population Estimate of Total Transportation Disabled

- Broad definition of disabled, similar to disabled RTA Special Users Card.
- A number of surveys of transportation disabled people have been conducted in the past few years. The most detailed of these surveys are from the late 1970's and early 1980's. The more recent surveys have been used to validate the older surveys.

<u>Source</u>	<u>National</u>	<u>Regional</u>	<u>City</u>
UMTA ('77) *	5.5%	3.9%	
DPW ('79)			3.5%
Census ('80)		3.6%	4.9%
Ontario ('86)		3.5%	
NYC ('87)			2.2%
DAD ('88)			4.6%

- UMTA survey is the only one that includes institutionalized individuals.

Conclusion: **Region** **3.9%**
 Chicago **4.9%**

- Using NIPCC's 1985 population estimates:
 6 County 7,249,000 x 3.9% = 283,000 TD Region
 Chicago 2,899,000 x 4.9% = 142,000 TD City
 Suburban 4,350,000 3.2% (calc.) 141,000 TD Suburbs

Note: It should be noted that although recent population estimates are used, the incidence rate of transportation disability in the suburbs is that found in sources from 1980. It should also be noted that the 1980 incidence rate for the City of Chicago is validated by the 1988 DAD Needs Assessment survey. Pace is currently developing a modified estimate of the suburban incidence rate.

Conclusion: **283,000 = Total Transportation Disabled In 6 county region**
 Nearly evenly split between suburbs and city

Population Estimate of Severely Mobility Limited (SML)

- Most of the surveys measure the ability of individuals to perform various portions of transportation activities. Generally, the survey responses are summarized by 'have little or some problem', 'have much or great difficulty', and 'cannot do'. One of the differences between the SML population and the Total Transportation Disabled population is that the 'little or some difficulty' category is not included.

- Sample survey results to determine the level of SML:

UMTA: 19% Cannot use at all
 30% Can use with a lot more difficulty
 51% Have a little difficulty

 49% of TD have more than a little trouble with public transportation.

DPW: 3.44% Transportation Disabled
 0.97% SML - great difficulty or cannot use bus

 27% of TD have great difficulty or cannot use public transportation

Ontario: 3.44% Transportation Disabled
 1.51% Unable to use or unable to board

 44% of TD are unable to use or unable to board public transportation

- Slightly different definitions are used for each. DPW results are generally accepted to be low in total number.

Conclusion: SML is 40% - 45% of total transportation disabled population.

Development of Population Estimates

— Need Lift Package

UNITA:

	All of the time	Most of the time	Some of the time	I D	SML
Difficulty Riding Standing	44%	8%	7%	59%	52%
Difficulty Waiting for Bus	32%	12%	10%	54%	44%
Difficulty Getting to Stop	31%	11%	7%	49%	42%
Difficulty Getting on Bus	30%	11%	8%	49%	41%
Difficulty Getting off Bus	28%	10%	6%	44%	38%

A subset of the items are relevant to 'need lift package'. Since the survey solicited multiple responses, there may be overlap. The getting on and off bus responses do not necessarily represent those that need lifts.

	% Prevented From Using			<u>ID</u>	<u>SML</u>
	All of the time	Most of the time	Some of the time		
Getting on bus					
-difficulty going up steps	21%	6%	4%	31%	27%
-no ramp available	10%	2%	1%	13%	12%
Getting off bus					
-difficulty going down steps	21%	5%	3%	29%	26%

Conclusion:

Need Lift Package	Transportation Disabled	35%

Severely Mobility Limited 30% of TD
70% of SML

Development of Population Estimates — Need Lift Package (cont.)

- From Great Britain, 1982 General Household Survey;

<u>Difficulties</u>	<u>User</u>	<u>Non-User</u>	<u>Total</u>	<u>% of TD</u>
Getting on or off only	344	68	412	25%
Getting to/from seat only -or- Getting to/from seat and getting on/off bus	98	30	128	8%
Waiting at stop only	37	8	45	2%
Getting to stop only -or- Getting there and waiting	160	76	236	14%
On vehicle and bus stop	245	243	488	29%
Other	332	30	362	22%
Population	12,280	7,580	19,860	100%

- From UMTA survey we know that not all problems with getting on and off the bus would be resolved by merely the provision of a lift package. Assume 15% (of the 25%) would need lift package only.

Conclusion:	20%	of 'need lift package' TD population overlaps with other areas
	<u>15%</u>	of 'need lift package' TD population only needs lifts
	35%	total transportation disabled 'need lift package'
	45%	of 'need lift package' SML population overlaps with other areas
	<u>25%</u>	of 'need lift package' SML population only needs lifts
	70%	Severely Mobility Limited 'need lift package'

Development of Population Estimates — Need Other Modifications

- The 'need other modifications' category changes the most from the total transportation disabled definition to the severely mobility limited definition.

• UMTA:

	<u>% ID</u>
can use	10%
can use with difficulty	69%
cannot use	21%

DPW:

	<u>% ID</u>
can use with some difficulty	73%
can use with great difficulty	10%
cannot use	18%

- To determine the size of population of SML that 'need other modifications'
 - based on DPW above $10\% / 28\% = 36\%$
 - review of UMTA survey detail suggests approx. 50% of SML 'need other modifications' and that most are likely to overlap with 'need lift package'

Conclusions: 70% of TD 'need other modifications'
45% of SML 'need other modifications' and nearly all overlap with other categories.

Development of Population Estimates — Need Escort

- Several sources used to develop an estimate of the population that 'needs escort'.

- DAD:

- 1988 Needs Assessment

-	231 / 473	49%	cannot use public transportation <u>without</u> assistance
	138 / 473	29%	can use public transportation <u>with</u> assistance

Therefore, an attendant makes 20% of riders 'able to use'

- Another part of the same study asked whether the respondent can understand and remember directions.

15% of the respondents cannot understand and remember directions. These individuals may be in the 'need escort' category.

- Virtually the entire TD population in 'need escort' category remains in that category in the SML definition.

Conclusion: 20% of TD 'need escort'
 35% of SML 'need escort'

- CTA Special Service data can be used to estimate the size of the overlap between the 'need lift package' category and the 'needs escort' category.

- CTA Special Services

11% of current riders are accompanied by attendants. Most of these riders would be in the 'need lift' category, some would be in 'need other modifications'

Conclusion: 8% of TD 'need escort' and 'need lift package'
 17% of SML 'need escort' and 'need lift package'

Estimated Population of Wheelchair Users

- Two primary sources of data on population of wheelchair users

- UMTA Survey
6.5% of TD in North Central region use wheelchairs
0.25% of general population

- DPW survey
5.1% of TD in Chicago use wheelchairs
0.1775% of general population

- Other sources:

- NYC
7.3% of TD in NYC use wheelchairs
0.16% of general population

- Ontario
8.5% of TD in Ontario use wheelchairs
0.29% of Ontario population

Conclusion: 0.18 - 0.25% of the general population uses a wheelchair
13,000 - 18,000 people in the region use wheelchairs

Estimate of Potential Market for Public Transportation Services

- An interim step before developing demand estimates for services is determining the potential demand for public transportation services by the transportation disabled and the severely mobility limited population.
- "Typically less than 1 in 4 eligible for specialized transportation register for the service" (Specialized Transportation Planning and Practice, Vol 1)
- CTA has 17,000 certified clients to use Special Services. The city population of SML is estimated to be 42% of TD population.
$$\begin{array}{rcl} 142,000 & \times & .42 \\ 17,000 / 60,000 & = & 28\% \text{ of eligible population is certified at the CTA} \end{array}$$
- Auto ownership and availability play a role in the level of public transit mode choice.

DPW: 66% of TD and 69% of SML 'Regularly drive or have access to auto'
17% drive and have available auto

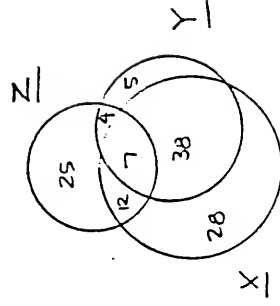
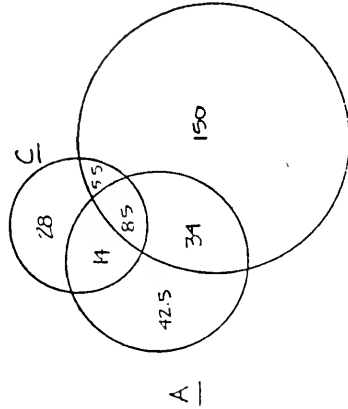
DAD: 33% drive (the DAD survey is not of transportation disabled, rather the more broadly defined category of disabled, transportation disabled is likely to be lower)

UMTA:	68% of TD have car available		
have car available	5,059	use public transportation	14%
		don't use public transportation	86%
don't have car available	2,381	use public transportation	42%
		don't use public transportation	58%
Total	7,440	use public transportation	23%
		don't use public transportation	77%

Conclusion: 25% - 35% of TD and SML population are likely to be users of public transportation services

Summary Conclusions

- 3.9% of regional population is transportation disabled (283,000)
 - 35% (99,000) need lift package — A
 - 70% (198,000) need other modifications — B
 - 20% (56,000) need escort — C
- 42% of the transportation disabled population (1.6% of regional population) is severely mobility limited (119,000)
 - 70% (85,000) need lift package — X
 - 45% (54,000) need other modifications — Y
 - 35% (41,000) need escort — Z
- Population in thousands — Transportation Disabled (A,B,C)
Severely Mobility Limited (X,Y,Z)



- 25% - 35% of the TD and SML populations are potential users of public transportation services.
 - Potential regional TD users 85,000
 - Potential regional SML users 42,000
- Regional population using wheelchairs is estimated to be 13,000 to 18,000. This represents 5 - 6% of the TD population, 11 - 15% of the SML population, or 0.18 - 0.25% of the general population.

APPENDIX B

Development of a Regional Plan for Transportation of the Disabled

Tasks and Schedule

Project Goal:

The goal of the proposed project is to formulate RTA and Service Board policy to provide the framework to support coordinated delivery of service to the disabled by the respective Service Boards, and to develop implementation plans for the region. The policy and plan will be formulated to be consistent with Federal and State requirements and to strike a balance between financial, operating and service issues as they relate to the provision of transportation for the disabled.

Project Objectives:

The project objectives are:

- Define RTA and Service Board goals for the Regional Plan project.
- Determine the legal responsibility of the Service Boards to provide service to the disabled.
- Assess the types of physical transportation needs of the disabled.
- Develop a consistent set of eligibility requirements for the region.
- Identify alternative strategies for the provision of transportation service to the disabled and establish service criteria to serve as a framework to evaluate proposed service delivery.
- Develop Implementation Plans (performed by the Service Boards) for recommended service.
- Evaluate the Implementation Plans to assure that they meet service criteria including, coordination among modes and among Service Boards, eligibility, and resources.
- Establish guidelines for evaluating future service and assessing resource allocation.

Project Management:

The project staffing will consist of a Management Team and a Policy Committee.

The Management Team will be composed of two or three staff representatives from each Service Board, and two RTA staff representatives. One RTA staff representative will be the project manager. The Management Team will be responsible for the research, analysis and report development and will report to the Policy Committee.

The Policy Committee will be composed of Board representation from each Service Board, and representatives of the RTA Mobility Limited Committee. The Policy Committee will be responsible for reviewing the work of the Management Team, and providing policy direction and guidance to the Management Team.

The Policy Committee and Management Team representatives from each Service Board will solicit input from Advisory Boards at their Service Board, as appropriate.

Proposed Project Tasks:

Task 1 is an organization task. Task 2 (Legal Responsibility), Task 3 (Physical Transportation Needs), and Task 5 (Review of Existing System) are tasks that are primarily background work and will be performed by the Management Team with input from the disabled community, and reviewed by the Policy Committee. Task 4 (Eligibility Requirements), Task 6 (Identify Additional Funding Sources), Task 7 (Identification of Strategies), Task 8 (Evaluation of Strategies), Task 9 (Development of Service Criteria), Task 11 (Evaluation of Implementation Plan), and Task 12 (Adopt Policies) require significant guidance and direction from the Policy Committee to the Management Team for conduct of the task. Task 10 (Development of Implementation Plans) will be performed by the Service Boards.

1. Organize project member participation and clearly establish project goals with the staff and policy representatives of the Service Boards and the RTA.
 - Identify staff representatives from each Service Board and the RTA to form the Management Team.
 - Identify Policy Committee participants from each Service Board and the RTA.
 - Articulate the project goals, and develop consensus of staff and policy project participants. Present to Policy Committee for input.
 - Adopt a schedule for the completion of the development of the Regional Plan.

Task Product(s): Staffing of both Management Team and Policy Committee.
Statement of project goals.

2. Determine the legal responsibility of the Service Boards to provide service to the disabled with respect to Section 504 of the Rehabilitation Act, Section 16 of the Human Rights Act, and other relevant law.
 - Review the proposed transit industry (APTA) policy and assess the Chicago area implications.
 - Review the direction of other similar transit properties in the provision of transportation to the disabled.
 - Determine the range of legal responsibility of the Service Boards for the provision of transportation for the disabled.

External Review/Assistance: Work with in-house legal counsel of RTA and Service Boards in the determining the legal requirements of each relevant law. MLAC (and other group if appropriate) review of the task product.

Management Team Responsibility: Perform review of the experience of other transit properties. Synthesize the results of the legal counsel into report.

Policy Committee Responsibility: Review, comment and adopt staff report.

Task Product(s): Report describing the legal responsibilities, by relevant law, and the direction of other similar transit properties.

3. Assess the types of transportation needs (as defined by the physical needs) of the disabled.
 - Determine the types of transportation needs of the disabled, matching the physical requirements for transportation need with the type of disability.

- Estimate population and demand by disability type using available data.
- Involve the disabled community through the Mobility Limited Advisory Committee (MLAC) of the Chicago Area Transportation Study (CATS), and other interested parties, including the providers.
- Encourage the input of the various advisory groups to the Service Boards through their respective staff and policy representatives.

External Review/Assistance: MLAC involvement in the identification of transportation needs and review of the task product. Consultation and review by Systan, Inc. MLAC (and other group if appropriate) review of the task product.

Management Team Responsibility: Synthesize existing information from the Service Boards, including significant input from MLAC, regarding types of transportation need.

Policy Committee Responsibility: Review, comment and adopt staff report.

Task Product(s): Report of types of transportation needs.

4. Develop a consistent set of eligibility requirements and registration procedures for the region.

- Identify current eligibility requirements and procedures for registration of eligible riders used by the Service Boards.
- Identify eligibility requirements and procedures for registration used by similar transit properties in other parts of the country.
- Develop recommended eligibility requirements and procedures for registration for region.
- Determine impact of changing eligibility requirements.

External Review/Assistance: MLAC (and other group if appropriate) review of the task product. Consultation and review by Systan, Inc.

Management Team Responsibility: With guidance from Policy Committee, develop recommended eligibility requirements and registration procedures and assess impact of changes.

Policy Committee Responsibility: Provide guidance to Management Team regarding eligibility requirements. Review, comment and adopt staff report.

Task Product(s): Report of recommended eligibility requirements and registration procedures and their associated impacts.

5. Review the existing and currently planned system of transportation options for the disabled and evaluate how the existing system meets the transportation needs of the disabled.

- Summarize existing Section 504 plans.
- Review Service Board plans for the direction of the provision of transportation for the disabled in the future.
- Consider the services offered by both the Service Boards as well as non-RTA providers.
- Evaluate the role and responsibility regarding transportation to special social service functions.

- Identify problems that consumers experience with existing service.
- Explore available and currently planned technology for provision of transportation to the disabled.

External Review/Assistance: Input from MLAC members regarding both the existing non-RTA services and the problems experienced with existing service and review of the task product. Review and comment by Systan, Inc. MLAC (and other group if appropriate) review of the task product.

Management Team Responsibility: Develop report that assesses the existing and currently planned system, including services not provided by Service Boards.

Policy Committee Responsibility: Review, comment and adopt staff report.

Task Product(s): Report of the assessment of existing and currently planned transportation services for the disabled.

6. Identify sources of funds that could be used to supplement current budgets for disabled services of the Service Boards.
 - Address the issue of identifying sources for additional resources for the provision of service for the disabled.
 - Define an annual funding review evaluation for disabled transportation service.

External Review/Assistance: Review by Systan, Inc. MLAC (and other group if appropriate) review of the task products.

Management Team Responsibility: Develop requirements for annual funding review. Identify potential sources of funding based on uses of transportation.

Policy Committee Responsibility: Determine plan and policy to seek additional funds for disabled transportation. Refine staff proposal for annual funding review.

Task Product(s): Plan for seeking additional funding for disabled transportation. Annual review process specified.

7. Develop alternative strategies using combinations of modes for the provision of transportation service to serve the needs of the disabled. Describe operating experiences used within and outside of the region for similar services.
 - Describe paratransit strategies (pricing policy, trip priorities, immediate service, etc.).
 - Describe strategies for providing mainstream service on regular fixed route service.
 - Develop alternative strategies, with combinations of paratransit and mainstream service, for evaluation.

External Review/Assistance: Possible consulting and review by a consultant with experience in operation of transportation for the disabled. MLAC (and other group if appropriate) input of proposed strategies and review of the task product.

Management Team Responsibility: Identify a range of strategies from paratransit to accessible service and combinations of the two.

Policy Committee Responsibility: Involvement in the identification of strategies for staff evaluation. Review and comment on staff evaluation of strategies.

Task Product(s): List and describe combinations of strategies for further evaluation.

8. Evaluate the alternative strategies identified in Task 7 for the provision of transportation service to serve the needs of the disabled, and recommend a strategy (or strategies).

- For each strategy conduct quantitative and qualitative evaluation. Include the following in the evaluation:
 - basic operational/management approaches of strategy
 - basic expense elements
 - capital costs
 - range of unit costs, and
 - transportation need being met.
- Evaluate the performance characteristics of the alternative strategies developed in Task 7 under various financial scenarios. The financial scenarios to be evaluated should range from unconstrained resources to Section 504 required level of resources.
- Evaluate strategies for the level of transportation services provided for the resources expended and within the constraint of the law.

External Review/Assistance: Consulting and review by Systan, Inc.. MLAC (and other group if appropriate) review of the task product.

Management Team Responsibility: Perform the quantitative and qualitative evaluation of the strategies. With Policy Committee direction, evaluate the strategies for the selected financial scenarios. Develop a report summarizing and discussing the performance of each strategy at the various financial scenarios.

Policy Committee Responsibility: Provide guidance as to the financial scenarios to be addressed. Review and comment on staff evaluation of strategies.

Task Product(s): Report summarizing the performance of each strategy at the various financial scenarios, and the recommended strategy (or strategies).

9. Establish service criteria to serve as a framework for evaluating Service Board provided Implementation Plans to assure regionally effective service provision.

- Service criteria to evaluate proposed service delivery, including eligibility, coordination, and cost.
- Specify how service criteria will be used to evaluate Implementation Plans.

External Review/Assistance: Consulting and review by Systan, Inc.. MLAC (and other group if appropriate) input to criteria development.

Management Team Responsibility: Develop comprehensive service criteria with Policy Committee input.

Policy Committee Responsibility: Involvement in development of service criteria.
Adopt service criteria.

Task Product(s): Report detailing service criteria and how they will be used.

10. Service Boards to develop Implementation Plans for strategy of their selection from recommended strategies of Task 8.

- Implementation Plans should include at a minimum:
 - operational description of service
 - operating budget
 - impact on farebox recovery ratio
 - annualized capital costs
 - staff commitment
 - projected ridership
 - implementation dates/schedule
 - interim operating plans
- Will be measured for consistency with Task 9 service criteria by Project Team.

External Review/Assistance: Service Boards develop Implementation Plans.

Management Team Responsibility: Service Board representatives of Management Team will be involved in the development of Implementation Plan at their respective agency.

Policy Committee Responsibility: Service Board representatives of Policy Committee will be involved in the development of Implementation Plan at their respective agency.

Task Product(s): Report describing Implementation Plan and interim operating plan.

11. Project team review of Service Board Implementation Plans based on the service criteria developed in Task 9.

- Review the Implementation Plans developed by the Service Boards for responsiveness to the service criteria to insure that regional coordination and quality of service is maintained.
- Combine the Service Board Implementation Plans into a regional implementation plan.

External Review/Assistance: Review by Systan, Inc. MLAC (and other group if appropriate) review of Implementation Plans.

Management Team Responsibility: Review of Service Board Implementation Plans for technical consistency with service criteria.

Policy Committee Responsibility: Review of Service Board Implementation Plans for policy consistency with service criteria.

Task Product(s): Approval of Service Board Implementation Plans, or re-direction if not consistent with service criteria.

12. Develop a final report of the work of the committees containing a consolidated Implementation Plan and Schedule. Adopt policy statements for approval at all four Boards.
- A consolidated Implementation Plan and Schedule.
 - Develop and adopt statements of policy at the three Service Boards and the RTA.
 - Produce Final Report,

External Review/Assistance: Review by Systan, Inc. MLAC (and other group if appropriate) review of the task products.

Management Team Responsibility: Develop final report, adding a Summary and Conclusions section. Finalize a schedule for the Implementation Plans.

Policy Committee Responsibility: Develop and adopt statements of policy for Board approval at each of the three Service Boards and the RTA. Review, comment and adopt Final Report.

Task Product(s): Final Report, schedule for Implementation Plans, and approval of policy statements by Service Boards and RTA.

Project Schedule:

<u>Task</u>	<u>Description</u>	<u>Schedule</u>
1.	Organize Project Team and Set Goals and Schedule	
	- Establish Project Team	November 18
	- Approved Goals and Schedule	December 9
2.	Determine Legal Responsibilities	February 17
3.	Assess Physical Transportation Needs	February 10
4.	Develop Consistent Eligibility Requirements	March 17
5.	Review Existing Disabled Transportation	February 24
6.	Identify Additional Funding Sources	May 19
7.	Identify Alternative Modal Strategies	March 31
8.	Evaluate Transportation Strategies and Select a Strategy	
	- Operational Evaluation of Strategies	April 21
	- Test Alternative Financial Scenarios	May 12
	- Recommend Strategy/Strategies	June 2
9.	Establish Service Criteria to Evaluate Implementation Plans	June 2
10.	Service Boards Develop Implementation Plans	July 28
11.	Evaluation of Implementation Plans	August 11
12.	Develop Final Report, Implementation Schedule and Adopt Policies	
	- Finalize Implementation Schedule	August 11
	- Adopt Policy Statements	August 18
	- Final Report	August 30

